



REPORT

ON THE

Health of the County Borough of Belfast for the Year 1952

S. BARRON, M.R.C.P.(I)., D.P.H.,

Medical Officer of Health



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SAMUEL BARRON, M.R.C.P.(I)., D.P.H.

Medical Officer of Health

Health Committee 1952

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Mrs. MARY O'MALLEY

Summary of Vital Statistics

Area (Census 1937) (Exclusive of 1,262 acres of tidal water)	15,289 acres.
Population	444,200 (estimate of Registrar-General for N.I., June, 1952)
Marriages	3,646
Marriage Rate	8·21
Births Registered	8,506 (4,379 males; 4,127 females)
Birth Rate	19·1
Birth Rate average for the ten years 1943—1952	21·8
Illegitimate Births	302 (171 males; 131 females)
Births (notified)	10,730
Still Births (included in total births notified)	314
Deaths	4,778 (2,471 males; 2,307 females)
Death Rate	10·8
Death Rate average for the ten years 1943—1952	11·6
Deaths of infants under one year of age	399 (244 males; 155 females)
Infant Mortality Rate	47 deaths per 1,000 births
Average for the ten years 1943—1952	65 deaths per 1,000 births
Neo-natal Deaths (under one month)	213
Neo-natal Death Rate	25 per 1,000 births
Average for the ten years 1943—1952	31·98 per 1,000 births
Maternal Deaths	9
Death Rate	1·06 per 1,000 births registered
Deaths from Communicable Diseases listed in Table VI	80
Death Rate from these Diseases	0·1
Deaths from Measles	4
Deaths from Typhoid Fever	Nil
Deaths from Scarlet Fever	Nil
Deaths from Whooping Cough	10
Deaths from Diphtheria	Nil
Deaths from Diarrhoea and Enteritis (under two years of age)	43
Deaths from Dysentery	Nil
Deaths from Influenza	18
Deaths from Tuberculosis of the Respiratory System	151
Death Rate from Tuberculosis of the Respiratory System	0·3
Deaths from Bronchitis	186
Deaths from Pneumonia	279

To

The Right Honourable The Lord Mayor (Councillor James Henry Norritt, J.P., F.C.I.S.) and the Aldermen and Councillors of the Belfast County Borough Council, acting as The Belfast County Borough Health Authority and The Belfast Port Sanitary Authority.

My Lord Mayor, Ladies and Gentlemen,

I have the honour to submit to you my Annual Report on the state of the public health and sanitary circumstances of the County Borough during the year 1952.

As in previous years the report is drafted in sections giving information on vital statistics, environmental work, personal health services, port sanitary work, etc.

From the statistical point of view the public health of the city was satisfactory. The general death rate of 10·8 was the lowest recorded rate for the city with the exception of 1948 when the rate was 10·3. The infantile mortality rate, however, did not continue its downward trend of recent years, as the figure for 1952 of 47 per 1,000 live births compares with 44 for 1951, which was the lowest on record for the city. During the first two months of the year the increased prevalence of pneumonia resulted in a considerable number of deaths among very young children, which caused a considerable increase in the infantile mortality rate. During the remaining months of the year fewer deaths of children brought the rate down to more normal limits. The number of deaths from infectious diseases was much lower than in previous years; there were no deaths from diphtheria, scarlet fever, typhoid or dysentery.

Apart from epidemics of whooping-cough and influenza and an outbreak of poliomyelitis (65 cases notified), the incidence of infectious disease was low. Only three cases of diphtheria were notified, showing the benefit to be derived from keeping up the resistance of children to infection by immunisation. Remembering the many distressing cases of this disease in pre-immunisation years and the many deaths which resulted, the success in controlling this disease by immunisation is an achievement of which we can be proud. A scheme for immunising children against whooping-cough has been introduced under which children receive the necessary injections either from the medical staff of the Health Department or from general medical practitioners. A combined diphtheria and whooping-cough vaccine is now available, and its use is proving a very popular means of acquiring protection against both diseases by a single series of injections.

It is again a matter of gratification to learn that the number of deaths from tuberculosis has continued to decline, bringing the death rate from pulmonary tuberculosis to the low record figure of 30 per 10,000 of the population—this is approximately one-third of the rate which was recorded 20 years ago. The total number of “pulmonary” deaths in the city dropped from 221 in 1951 to 151 in 1952, by far the lowest number ever recorded in this area. These figures represent a very satisfactory reduction and suggest that we may at last be getting to grips with our tuberculosis problem. In attaining this result, prevention has played its part, but credit must also be given to improved methods of treatment, both surgical and medical. In previous reports I have commented upon the value of such preventive measures as early discovery of cases by mass-radiography, tuberculin testing, and clinical examination of contacts. I have stressed the value of health education with particular reference to the prevention of infection. B.C.G. vaccination now promises to be one of the most helpful methods of reducing the incidence of tuberculosis and in collaboration with the Northern Ireland Tuberculosis Authority it is proposed to undertake the tuberculin testing and B.C.G. vaccination of babies and of schoolchildren in the age group 11—12 years. It is hoped to have the scheme in operation early in 1953.

Statistical figures showing greatly reduced incidence and mortality rates of the bacterial diseases go to show that many of the infectious diseases have been eliminated as a hazard to health. Typhoid Fever, Typhus, Smallpox and Cholera have largely disappeared by the adoption of preventive measures, whilst diphtheria is yielding to immunisation. Table III of the report indicates that the so-called “stress diseases”—heart disease, intra-cranial haemorrhage, and degenerative diseases—take a leading place as causes of death, whilst cancer or malignant disease is not showing any tendency to decline, in spite of better methods of treatment and diagnosis; in fact the mortality rate has shown an upward trend for many years. It would thus appear that we have much to learn as to the causes of most of the principal killing diseases, and the measures for their prevention.

Erratum

Page 4. Para. 5, Line 3—For 30 per 10,000 read 30 per 100,000.

Domiciliary Health Services:

Many of the services provided by your Health Committee are available for the benefit of persons in their own homes. The domiciliary services include health visiting, home nursing, maternity medical and midwifery services, home helps, care and after-care. The report indicates that during 1952 these services were largely made use of and there can be no doubt that they have had a beneficial effect in promoting the health of the citizens.

Clinic Services:

Some of the personal health services are provided at clinics, *e.g.*, Child Welfare, School Medical and Dental Care, Ante-Natal care, Immunisation and Vaccination, etc. An account of the work carried out at the various clinics during the year is given in the relevant sections of the report. A satisfactory feature of the School Health Services report is the appointment of a more adequate number of Dental Officers to overcome the arrears of dental inspection and treatment which had accumulated over the past four years due to the shortage of dentists available for the filling of vacancies on our staff.

Environmental Services:

Whilst the new health services are important agencies for the maintenance of health and prevention of illness, the old-time environmental services are of no less importance. The report shows that a large amount of work was carried out in the inspection of houses. In addition to the usual investigation of complaints of insanitary conditions and the procedure taken for the abatement of nuisances injurious to health, your sanitary officers had additional duties in connection with the inspection of houses and the issue of certificates and reports under the provisions of the Rent Restriction Law (Amendment) Act (Northern Ireland), 1951. During the year the demand for these certificates and reports was so great that, even working long hours of overtime, the sanitary officers had great difficulty in meeting the demand.

The supervision of food is an important environmental service. The report of this section of the Department shows that careful attention was given to the inspection of food, its preparation, transport and handling, the conditions under which it was stored and exposed for sale and the laboratory examination of samples; all of which were undertaken with the object of safeguarding the health of the citizens who are obliged to rely upon our activities in this matter. The reports of food inspectors and the results of analysis and laboratory tests are much more satisfactory than was the case previously. It is gratifying to report that the standard of hygiene adopted by the majority of owners and persons employed in catering and food premises has greatly improved during the past few years. During 1952 not a single case of food poisoning could be attributed to the consumption of food supplied in food premises in the city.

Ice Cream:

Ice-cream, on account of its potentialities for acquiring and transmitting infection, has always been a source of anxiety and considerable attention has been devoted to its supervision. During the past few years large numbers of samples were submitted to bacteriological examination and the results indicated a large variation in standards of hygiene and wholesomeness. During the year there was a considerable improvement in the hygienic standard of the samples submitted for examination. The unsatisfactory samples were usually found to come from premises in which the standard of cleanliness was poor or at which there were faulty methods of handling.

Evening classes at the Belfast College of Technology were specially provided for instruction in food hygiene. These classes were not as fully attended by persons engaged in food handling as they might have been.

Health Education:

The programme of Health Education was pursued with vigour during the year. The monthly Health Slogan Competitions at schools attracted much attention. The attendance at the Clean Food Exhibition held in the City Hall in January was not up to our expectations, but the Health Exhibition in the Wellington Hall, organised by the Royal College of Nursing in March, attracted many visitors. The demand for lectures to organisations interested in health continued as in previous years. In addition to the informal addresses given at meetings of Parents' Associations, Women's Institutes and various Youth Organisations, your Medical Officer of Health had the opportunity of

addressing meetings of The Royal College of Midwives, The Ulster Paediatric Society, The Association of Teachers of Domestic Economy, East Belfast Discussion Group and other organisations.

In our Health Education activities at Child Welfare Centres special attention is given to the prevention of accidents in the home. Health Visitors are constantly dealing with this matter when visiting families in which there are children.

Housing:

From the public health point of view the outstanding need of the city is still additional housing accommodation. A report of your Housing Committee indicated that fairly good progress has been made in the building programme during the year, but many more houses are still needed as is shown by the long list of names of applicants for Corporation houses. This list indicates the extent of the problem, but it gives no idea of the plight of those unfortunate families who are living in overcrowded or unsatisfactory conditions. Moreover, even when those now requiring houses have all obtained accommodation, more houses will still be required owing to the fact that many now in occupation are so dilapidated that they should be demolished: they are of little or no value to their owners. Indeed some have become a liability and it would not be a really sound policy to have them brought up-to-date: they must be condemned and demolished as soon as those who occupy them can secure alternative accommodation. This implies the advisability of preparing schemes for slum clearance and, in spite of the difficulties in giving effect to the demolition of unsatisfactory houses, it is hoped that slum clearance will be undertaken at an early date.

Some of the property now occupied as multiple-tenancy houses might be acquired by the Corporation and reconditioned by structural alterations to convert them for use as residential flats. The acquisition and reconditioning of many of the larger type terrace houses now occupied as multiple-tenancy dwellings would to some extent overcome the existing unsatisfactory living conditions in the rooms which are often sub-let at inflated rents.

It would also be helpful if provision could be made for giving financial assistance for the carrying out of specified repairs to "unfit" houses capable of being rendered fit for habitation at reasonable expense. In these cases the increase of rent authorised by the Rent Restriction Law (Amendment) Act (N.I.) 1951 is not sufficient to give an economic return to meet the cost of specified repair work. By this means it would be possible to prolong the period of use of many sub-standard houses, and thus relieve some of the pressure for the provision of new houses and the hardships due to the housing shortage.

I have previously referred to the undesirability of erecting houses on vacant ground in congested districts in the city. I contend that these vacant spaces should be reserved as open spaces and children's play centres which are so badly needed as a health amenity. The problem of providing housing accommodation for families should receive the attention of the various authorities who have responsibilities for their health and social welfare. Many such families are living under conditions which are injurious to health, especially in cases where children are the sufferers. It would seem that some form of rent subsidy scheme should be provided for these cases.

Comprehensive Proposals for Health Authority Functions:

Towards the end of 1952 the Ministry of Health and Local Government required Local Health Authorities to submit comprehensive proposals for performing their functions under the provisions of the Education Act (Northern Ireland) 1947 and the Health Services Act (Northern Ireland) 1948, covering a period of five years. Your Health Committee gave careful consideration to this matter and indicated the immediate and long term development policies relating to the various health services for which you are responsible. The proposals did not envisage any marked extension of the health services, most of which were in operation for many years before the coming into operation of the Health Services Act. The Health Committee, however, recognised that suitable premises in various parts of the city were required for the carrying out of clinic work and Home Nursing Services. Some of the premises at present used for Child Welfare and School Health work are entirely unsuitable for the purpose: the Committee has under consideration a building programme, the cost of which is estimated to be approximately £250,000.

In March the Minister of Health and Local Government, Dame Dehra Parker, officially opened the Cherryville Street School Health Clinic which had been closed for repairs and extension of the premises. This clinic is now a much improved building and better fitted to serve most of the school health needs of East Belfast.

In submitting this Report I take the opportunity to acknowledge my indebtedness to those members of the staff who assisted in its preparation, particularly to Mr. S. N. Smith, my Administrative Officer, who was responsible for its compilation and accuracy. I desire to thank the Registrar General for Northern Ireland for the statistical information. I am also indebted to the Belfast Harbour Commissioners, the Belfast City and District Water Commissioners, Her Majesty's Customs and Immigration Departments, and other Belfast Corporation Departments for their continued collaboration and help. I also gratefully acknowledge the willing co-operation and assistance received from the Ministry of Health and Local Government and other Ministerial Departments.

Finally I would express my sincere thanks to the Chairman and Members of your Health Committee for their unfailing support and encouragement during the year.

I have the honour to be,

My Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

S. BARRON,

*Medical Officer of Health, Port Medical Officer
and Medical Inspector of Aliens.*

TABLE I.
BELFAST COUNTY BOROUGH
CAUSES OF DEATH AT DIFFERENT AGE PERIODS, 1952.

Abbr- viated List Nos.	Causes of Death	Total Deaths	MALES										FEMALES													
			All Ages	AGED							Total under 1 year	Under 1 mth	6-12 mths	13-15 mths	1-4	5-14	15-24	25-44	45-64	65-74	75 & over					
				1-4	5-14	15-24	25-44	45-64	65-74	75 & over																
	All Causes	4,778	2,471	132	88	24	244	28	29	31	150	738	651	600	2,307	81	50	24	155	21	13	25	138	490	585	75 & over
B1	Tuberculosis of Respiratory System	151	96	—	—	—	—	—	—	3	21	58	12	2	55	—	—	1	—	1	—	9	28	13	2	2
B2	Tuberculosis, Other Forms	20	7	—	—	—	—	—	—	2	—	—	—	—	13	—	—	1	—	4	3	—	2	—	1	1
B3	Syphilis and its sequelae	16	11	—	—	—	—	—	—	1	—	6	3	1	5	—	—	—	—	—	—	—	2	—	2	2
B4	Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B5	Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B6	Dysentery, all Forms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B7	Scarlet Fever and streptococcal sore throat	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B8	Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B9	Whooping Cough	10	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B10	Meningococcal Infections	4	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B11	Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B12	Acute Poliomyelitis	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B13	Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B14	Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	2	—	—	—	—	—
B15	Typhus and other Rickettsial diseases	4	2	—	—	—	—	—	1	—	—	—	—	—	2	—	1	1	—	—	—	—	—	—	—	—
B16	Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B17	Other Infections and Parasitic Diseases	16	6	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B18	Malignant Neoplasms, including neoplasms of lymphatic and haematopoietic tissues	734	394	—	1	—	—	1	—	2	26	151	130	79	340	—	—	—	—	1	2	—	26	137	99	75
	(a) Cancer	23	12	—	—	—	—	—	—	3	2	2	1	1	11	—	—	—	—	—	—	—	4	5	1	—
B19	(b) Hodgkins disease and Leukaemia	20	9	—	—	—	—	—	—	2	4	1	4	—	—	—	—	—	—	—	—	1	—	—	—	—
B20	Benign and unspecified neoplasms	18	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B21	Diabetes Mellitus	15	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B22	Anaemias	646	244	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Vascular Lesions affecting Central Nervous System	7	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B23	Nonmeningococcal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE II

Showing the number of deaths, the death rates and the percentage of total deaths by age groups.

Age Group (Years)	Deaths			Rate per 1,000 of population of age group	Percentage of Total Deaths	
	Male	Female	Total		1952	1951
Under 1 Year	244	155	399	48.5	8.35	7.08
1—4	28	21	49	2.1	1.02	1.3
5—14	29	13	42	0.06	.87	0.79
15—24	31	25	56	1.1	1.17	1.45
25—44	150	138	288	2.9	6.02	6.66
45—64	738	490	1,228	14.2	25.7	24.7
65—74	651	585	1,236	56.3	25.8	26.61
75 and over	600	880	1,480	140.2	30.9	31.42

TABLE III

The Principal causes of deaths (in order of importance) were as follows:—

1. Heart Disease	.....	.....	.....	.....	.....	.....	1,416
2. Cancer	.....	.....	.....	.....	.....	.....	757
3. Vascular Lesions affecting the Central Nervous System	.....	.....	.....	.....	.....	.....	646
4. Pneumonia	.....	.....	.....	.....	.....	.....	279
5. Bronchitis	.....	.....	.....	.....	.....	.....	186
6. Pulmonary Tuberculosis	.....	.....	.....	.....	.....	.....	151
7. Violent or Accidental Deaths	.....	.....	.....	.....	.....	.....	141
8. Senility and Ill-defined and Unknown Causes	.....	.....	.....	.....	.....	.....	98

TABLE IV

Trend of mortality from certain principal causes of death in Belfast from 1933.

Year	Heart Disease	Rate per 1,000	Cancer	Rate per 1,000	Pulmonary Tuber- culosis	Rate per 1,000	Bronchitis Influenza Pneumonia	Rate per 1,000
1933	877	2.1	493	1.18	429	1.0	1,223	3.0
1934	855	2.06	513	1.23	398	0.96	773	1.86
1935	915	2.2	480	1.16	389	0.93	938	2.26
1936	1,280	2.93	585	1.34	406	0.93	770	1.77
1937	1,306	2.98	564	1.28	414	0.95	1,013	2.31
1938	1,314	2.96	568	1.28	348	0.78	748	1.69
1939	1,344	3.03	572	1.29	365	0.82	630	1.42
1940	1,387	3.1	576	1.29	412	0.93	1,001	2.25
1941	1,277	2.87	570	1.28	426	0.96	773	1.74
1942	995	2.24	633	1.42	369	0.83	564	1.27
1943	1,116	2.63	613	1.44	367	0.86	705	1.66
1944	1,098	2.54	620	1.44	354	0.82	544	1.26
1945	1,130	2.59	664	1.52	326	0.75	533	1.22
1946	1,302	2.92	682	1.53	343	0.77	692	1.55
1947	1,482	3.29	662	1.47	281	0.62	618	1.37
1948	1,281	2.81	696	1.53	269	0.59	438	0.96
1949	1,407	3.09	699	1.54	280	0.61	536	1.18
1950	1,500	3.33	717	1.59	225	0.5	565	1.26
1951	1,630	3.67	693	1.56	221	0.49	813	1.83
1952	1,416	3.18	757	1.7	151	0.34	483	1.0

TABLE V

Comparative Statistics for Counties and County Boroughs, 1952

Counties and County Boroughs	Rate per 1,000 Population		Rate per 1,000 Live Births	
	Births	Deaths	Infant Mortality	Maternal Mortality
Belfast County Borough	19·1	10·8	47	1·06
Londonderry County Borough	27·7	10·0	45	—
Leeds County Borough	15·3	12·5	30	0·78
Edinburgh County Borough	15·0	12·6	29	0·1
Manchester County Borough	17·5	12·1	34·3	0·71
Bradford County Borough	16·2	13·5	33	1·04
Antrim County	20·7	9·6	30	0·62
Armagh County	21·3	10·9	41	2·05
Down County	19·5	11·2	34	1·07
Fermanagh County	21·9	12·4	25	0·86
Londonderry County	23·7	10·6	34	1·19
Tyrone County	24·2	11·8	43	1·56

TABLE VI

Showing the number of deaths from certain communicable Diseases during the ten years, 1943-1952.

YEAR	Typhoid Fever	Scarlet Fever	Diphtheria	Puerperal Fever	Cerebro- Spinal Fever	Poliomyelitis	Measles	Influenza	Diarrhoea	Dysentery	Whooping cough
1943	4	3	10	11	5	3	11	50	310	—	40
1944	—	2	11	4	3	—	1	21	202	1	22
1945	1	2	7	5	2	4	10	16	188	1	26
1946	—	2	2	3	2	3	5	54	127	—	31
1947	7	—	3	1	—	4	42	27	123	—	35
1948	1	—	4	—	—	—	9	10	77	1	15
1949	1	—	6	—	—	—	3	29	109	1	9
1950	1	2	3	—	5	11	5	32	37*	2	16
1951	—	1	1	—	4	2	3	232	54*	—	4
1952	—	—	—	—	4	2	4	18	43*	—	10

*—Under two years of age.

TABLE VII

Showing the population, the number of Births, the Birth Rate per 1,000, the number of Deaths, the Death Rate per 1,000, and the natural increase during the twenty years, 1933-1952

Year	Population	No. of Births	Birth Rate per 1,000	No. of Deaths	Death Rate per 1,000	Natural Increase
1933	415,151	8,599	20.7	6,318	15.2	2,281
1934	415,151	9,086	21.9	5,676	13.7	3,410
1935	415,151	8,848	21.3	6,238	15.0	2,610
1936	436,000	9,242	21.2	6,207	14.2	3,035
1937	438,112	9,150	20.9	6,341	14.5	2,809
1938	443,500	9,146	20.6	6,069	13.7	3,077
1939	443,500	8,966	20.2	5,758	12.9	3,208
1940	444,500	8,704	19.6	6,583	14.8	2,121
1941	444,500	8,383	18.9	6,641	14.9	1,742
1942	444,500	9,659	21.7	4,973	11.2	4,686
1943	425,000	10,713	25.2	5,511	13.0	5,202
1944	430,800	10,456	24.3	5,176	12.0	5,280
1945	435,900	9,853	22.6	5,069	11.6	4,784
1946	444,687	10,327	23.2	5,326	11.9	5,001
1947	450,000	10,505	23.3	5,289	11.7	5,216
1948	455,020	9,744	21.4	4,684	10.3	5,060
1949	454,340	9,185	20.2	5,226	11.5	3,959
1950	450,000	8,834	19.6	5,082	11.3	3,752
1951	444,222	8,789	19.8	5,433	12.2	3,356
1952	444,200	8,506	19.1	4,778	10.8	3,728

TABLE VIII
BELFAST COUNTY BOROUGH
Deaths from Cancer by Sex and Site, 1952

Detailed List Nos.	SITES	Males	Females
Buccal Cavity and Pharynx:			
140	Lip	—	1
141	Tongue	2	2
142	Salivary Gland	1	—
143-144	Mouth	5	1
145-148	Pharynx	8	3
Digestive Organs and Peritoneum:			
150	Oesophagus	16	10
151	Stomach	95	58
152-153	Intestines	48	36
154	Rectum	22	12
155-156	Biliary Passages and Liver	6	17
157	Pancreas	13	13
158	Peritoneum	2	2
159	Other Digestive Organs	—	—
Respiratory System:			
160	Nose, Nasal Cavities, etc.	—	—
161	Larynx	4	2
162-163, 165	Trachea, Bronchus and Lungs	94	19
164	Mediastinum	—	2
Breast and Genito-Urinary Organs:			
170	Breast	1	57
171-174	Uterus	—	33
175	Ovary, Fallopian tube and Broad Ligament	—	15
176	Other Female Genital Organs	—	5
177	Prostate	20	—
178	Testis	1	—
179	Other Male Genital Organs	3	—
180	Kidney	5	6
181	Bladder and Other Urinary Organs	8	7
Other and Unspecified Sites:			
190-191	Skin	4	6
192	Eye	1	2
193	Brain and other parts of the Nervous System	9	10
194	Thyroid Gland	1	4
195	Other Endocrine Glands	—	—
196	Bone	2	2
197	Connective Tissue	—	—
198-199	Other Sites	15	9
200-202 } 203-205 }	Neoplasms of Lymphatic and Haematopoietic Tissues	8	6
TOTAL		394	340

TABLE IX

Showing by age periods and sexes the number of cases of certain communicable Diseases notified, pursuant to the Infectious Disease (Notification) Act, 1889

DISEASE	Under 1 Year		1 Year and under 2 Years		2 Years and under 5 Years		5 Years and under 10 Years		10 Years and under 15 Years		15 Years and under 25 Years		25 Years and under 45 Years		45 Years and upwards		Age unknown		Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Typhoid Fever	—	—	—	—	—	—	—	2	—	—	2	—	1	—	—	—	—	—	5
Dysentery	5	8	9	4	6	7	8	4	3	2	—	4	1	3	—	2	—	3	69
Scarlet Fever	1	—	9	9	68	64	93	108	16	18	8	1	2	2	—	—	—	—	399
Diphtheria	—	—	—	—	—	—	1	—	—	1	—	1	—	—	—	—	—	—	3
Cerebro-Spinal Meningitis	10	11	1	6	7	2	1	—	3	2	1	—	—	—	—	—	—	—	44
Poliomyelitis	2	—	1	3	3	4	14	5	6	5	9	4	3	4	—	2	—	—	65

MEASLES—2,702 Cases notified.

WHOOPIING COUGH—2,131 Cases notified.

TABLE X

Showing the number of cases of certain communicable Diseases notified during the ten years 1943-1952, pursuant to the Infectious Disease (Notification) Act, 1889

	Typhoid Fever	Dysentery	Food Poisoning	Scarlet Fever	Diph- theria	Cerebro- Spinal Meningitis	Polio- myelitis	Puerperal Fever	Erysipelas
1943	29	5	—	1,964	322	75	2	2	60
1944	5	6	—	1,679	217	48	5	5	67
1945	14	5	—	768	213	39	20	1	76
1946	13	6	—	753	220	39	8	1	95
1947	43	1	—	1,144	115	24	61	1	77
1948	6	18	—	931	107	25	8	4	108
1949	3	33	34	2,931	107	25	13	1	98
1950	5	35	55	1,668	45	22	109	4	82
1951	24	170	40	349	10	34	36	4	39
1952	7	69	16	399	3	44	65	56	49

TABLE XI

Showing notifications of, and deaths from certain communicable diseases in the year 1952 with comparisons with the year 1951 and the averages for the years 1942-1951.

	Notifica- tions	Corrected Notifica- tions	Notifica- tions in 1951	Average Annual Notifica- tions 1942-51	Deaths 1952	Deaths 1951	Average Annual Deaths 1942-51
Diphtheria	3	3	10	178	—	1	6
Scarlet Fever	399	390	349	1,297	—	1	1
Erysipelas	49	49	39	78	—	—	—
Cerebro-spinal Fever	44	39	34	45	4	4	3
Poliomyelitis	65	59	36	27	2	2	3
Measles	2,702	2,698	3,354	3,044	4	3	10
Whooping Cough	2,131	2,128	834	914	10	4	21
Diarrhoea and Enteritis (under 2 years of age)	505	489	579	*	43	54	*
Dysentery	69	71	173	28	—	4	1
Typhoid and Paratyphoid	7	7	24	15	—	—	1.5
Food Poisoning	16	18	36	*	—	—	*

*—indicates figures not available

COMMUNICABLE DISEASES.

Whooping Cough:

An epidemic of this disease during the first half of the year reached a peak of weekly notifications twice as high as that of any previous epidemic. The high infectivity of whooping cough was very obvious: families with three or four children were ill at the same time, and indeed it was noted that in some streets all the susceptible children became infected during the epidemic. Fortunately the low mortality rates of recent years were maintained, a total of only 10 deaths being registered. Once again it was noted that the number of deaths from pneumonia in infants under one year of age increases during a whooping cough epidemic. This is probably due to the fact that some young infants succumb to the complication of broncho-pneumonia and toxæmia before the whoop is apparent. Thus the deaths registered as due to whooping cough are certainly an understatement of the killing powers of this disease.

Whooping Cough Immunisation:

As a natural consequence of the epidemic there was a demand from parents for immunisation against whooping cough for their children. This was provided at our clinics for children from three months to two years of age, and was combined with diphtheria immunisation using alum precipitated vaccine. A follow-up of some of these immunised children three to four months after completion of immunisation was made. It was found that 12 infants had been in contact with whooping cough in their own homes, *i.e.*, with non-immunised sibs who developed the disease; of these 12 infants three developed mild attacks. Another 42 immunised infants were exposed to whooping cough in the same street and none developed the disease. There was no known exposure to infection in 168 infants of whom 2 developed mild attacks. These findings are consistent with those of large scale surveys which also show a protection rate in the region of 75 per cent.

Poliomyelitis:

Of 59 diagnosed cases, 45 were non-paralytic. In addition there were many cases with mild meningeal signs and symptoms treated at home by their own doctor.

The outbreak was similar to that of 1951. The early cases in May and June included children up to two years of age with paralysis usually of one site only: the later cases, up to the end of September, were older children and adults with no paralysis. The epidemiological picture suggests that two different viruses were concerned.

In spite of the increased number of cases there was little evidence of public alarm. The local press co-operated in the publication of the reassuring features of the epidemic.

Intestinal Infections:

Cases of food poisoning were few in number and sporadic in appearance. Thanks to health education activities there is a good appreciation of the causes and prevention of food poisoning among food handlers, and co-operation with these workers has been excellent. It was, however, somewhat disappointing to note that the finding of salmonella typhimurium in a patient in an institution was not regarded as infectious, and that the medical officers concerned were not aware that food poisoning is notifiable.

The throat swab could with benefit be more often called the rectal swab and used accordingly.

Enteric Fever:

			Phage Type	Remarks
Paratyphoid B	.....	.....	2	Laboratory infection.
„	.....	.....	Jersey	Contracted in France.
Thyphoid	.....	.....	0	Primary case a seaman, infected abroad. Two secondary cases.
„	.....	.....	E1	Two cases, apparently unrelated. Source unknown.

Phage type E1 is known to be present in an institution near Belfast.

Vaccination against Smallpox:

Performed by	Successful	Insusceptible	Total
General Practitioners	4,724	642 (12%)	5,366
Health Authority Doctors	996	28 (3%)	1,024
		Total	6,390

This total of 6,390 represents 73% of the total live births in 1952. During the year the vaccination enforcement officer made 2,582 visits to the homes of children in respect of whom no certificate had been received, with the following results.

Vaccinated by own doctor, vaccination scar shown	114
Stated to be vaccinated, no evidence offered	164
Not vaccinated	910
Infant ill or unfit	257
Gone away, address unknown	426
Infant deceased	8
No admission obtained	703
Total	2,582

The smooth administration of the Vaccination Acts is upset by—

- (a) the delay or absence of notification of vaccination by general practitioners;
- (b) the neglect to use the certificate of unfitness where necessary;
- (c) the frequency with which the address given on notification of a birth is a temporary one.

It is interesting to note how far compulsory vaccination in Belfast achieves its object, bearing in mind that the situation is in fact one of strong persuasion with the threat of legal proceedings in the background. An accurate follow-up of infants born in March and August, 1951, reveals that out of a total of 1,468 of these infants still alive in 1952, 112 had left Belfast, and of the remainder 1,158 had been submitted to vaccination, this representing 85%. This is substantially confirmed by the findings at school medical inspections which consistently show 80% of children with visible vaccination marks.

This may be contrasted with the position in England where County Boroughs similar to Belfast show vaccination rates varying from 5% to 54%.

W. J. McLEOD, M.D., D.P.H., Ph.C.

Diphtheria Immunisation

During the year 6,340 children completed a course of treatment against Diphtheria: of these 4,073 were immunised at clinics, schools, and institutions by the Health Committee's Medical Officers and 1,267 by private practitioners. In addition 5,281 children received reinforcing injections; 4,997 by Health Committee's Medical Officers and 284 by private practitioners. Among young adults 30 primary Schick tests yielded 8 positives (27%); while 98 post schick tests yielded 9 positives (9%).

Table Showing Age Grouping of Immunised Children

Age at end of Year	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	At end of 1952
Under 1 year	6	17	33	71	36	69	33	57	72	99	89	54	116	147	
1—	253	299	906	1,634	2,576	2,492	2,445	2,329	2,475	2,597	2,453	1,642	1,982	2,167	Total under 5 years
2—	204	335	1,405	1,373	1,642	1,329	1,474	1,554	1,259	1,236	1,291	892	1,210	937	12,790
3—	205	285	1,258	985	1,043	628	614	752	517	523	633	381	393	413	35% of this group
4—	268	346	1,228	937	997	453	358	514	430	352	382	248	224	196	
5—	366	508	1,262	929	1,022	663	542	557	604	562	699	612	520	690	Total over 5 and under 10 years
6—	656	818	1,408	1,123	1,133	965	810	691	664	655	881	762	669	912	32,052
7—	753	756	1,356	1,017	963	802	678	615	480	360	595	500	441	464	76% of this group
8—	420	399	995	567	706	492	360	328	263	186	221	237	193	210	
9—	223	182	647	315	382	251	170	132	121	61	91	80	81	76	
10—	119	88	433	221	222	107	71	75	59	34	47	29	28	35	Total over 10 and under 15 years
11—	50	61	200	103	81	44	44	50	32	33	29	14	13	18	31,608
12—	29	33	213	85	73	33	18	35	36	17	29	8	6	7	86% of this group
13—	28	22	171	86	78	47	40	27	19	20	15	22	16	21	
14—	17	11	141	60	40	26	27	25	23	9	42	1	21	46	
15	24	11	78	180	37	25	67	21	22	12	117	2	18	1	
TOTAL	3,621	4,180	11,734	9,686	11,031	8,428	7,751	7,762	7,076	6,756	7,614	5,484	5,931	6,340	

REPORT OF HEALTH EDUCATION OFFICER

Every opportunity was taken to promote healthy living and encourage a positive attitude to health. Many and varied means were adopted to further this work of educating the public including the use of lectures, films, posters, pamphlets, exhibitions, displays, classes, competitions, etc. Apart from the general effect that these efforts have had they often result in informal discussions and personal contact. The information service thus established must be regarded as an important part of Health Education.

Contact was maintained with every type of organisation and society and facilities were offered to the whole community for furthering health through education.

The Health Slogan Competition organised for schoolchildren had an enthusiastic response. More than 3,000 children took part in the competition and nine awards were made during the year.

During the first part of the year hygiene classes were held for those engaged in the food trade; about 40 people started the course but only 20 finished. It is disappointing that so few are now responding to this opportunity of learning how to maintain a high standard of hygiene in the food trade. There is a public demand for a higher standard in the field and it is most unsatisfactory to note that the facilities offered are appreciated by only a few outstanding examples in the trade.

In conjunction with the Ministry of Food an exhibition was held in the City Hall in January and the Department co-operated with the Royal College of Nursing in staging an exhibition in the Wellington Hall during February. Throughout the year minor displays were on view at the Clinics.

In the field of propaganda large posters were displayed throughout the City and smaller posters were used in the City Transport whilst over 10,000 leaflets and booklets were distributed.

Regular educational sessions were held in the Child Health Centres with the health visiting staff carrying out a most useful part in Health Education.

The local press and B.B.C. have again been most helpful in co-operating with the department and it is hoped that the good relations will continue.

Details of formal lectures are given below:—

Date	Organisation	Subject	Speaker	Approx. No. present
17/1/52	Health Visitors	Health Education	Deputy Medical Officer of Health	—
31/1/52	do.	do.	do.	—
3/3/52	Somerton Housewives League	Healthy Living	Health Education Officer	80
18/3/52	Malone Parents' Association	Your Health	do.	80
3/4/52	Health Visitors	Health Education	Deputy Medical Officer of Health	—
8/4/52	St. Andrews Boys	Health	Health Education Officer	100
9/4/52	Home Nurses	Health Education	Deputy Medical Officer of Health	—
16/4/52	do.	do.	do.	—
29/4/52	do.	do.	do.	—
24/9/52	do.	do.	do.	—
30/9/52	do.	do.	do.	—
1/10/52	do.	do.	do.	—
2/10/52	Manor Street Boys Club	First Aid.....	Senior Medical Officer	60
11/11/52	Fane St. Parents Association	Health	Health Education Officer	80
13/11/52	Federation of Boys Clubs	Nutrition	Senior Medical Officer	60
14/11/52	Boy Scouts Association	Health	Health Education Officer	80
19/11/52	Institutional Management Association	Films	do.	80
24/11/52	Grove Parents' Association	Child Health	Medical Officer of Health	80
25/11/52	Trinity Mothers Meeting	Family Health	Health Education Officer	40
2/12/52	Federation of Boys Clubs	Body Building	Senior Medical Officer	45
9/12/52	Ewatts Mill Nursery— Parents Association	Films	Health Education Officer	50
11/12/52	Federation of Boys Clubs	Health	Senior Medical Officer	45
1/12/52	Sanitary Inspectors	Food	do.	20
19/12/52	Knockbreda Youth Guild	General Health	do.	40

E. STRATHDEE, B.A.

REPORT OF THE PORT SANITARY AUTHORITY FOR YEAR 1952.

The Corporation of Belfast, as the Sanitary Authority, was permanently constituted the Port Sanitary Authority for the Port of Belfast by the Local Government Board (Ireland) Provisional Orders Confirmation (No. 4) Act 1900.

The expenses of the Port Sanitary Authority are contributed by the Urban and Rural Sanitary Authorities in the following proportions:—

The Corporation of Belfast	.....	.....	.....	92 per cent
The Carrickfergus Urban District Council	.....	.....	.....	1 per cent
The Holywood Urban District Council	.....	.....	.....	1 per cent
The Bangor Borough Council	.....	.....	.....	1 per cent
The Belfast No. 1 Rural District Council	.....	.....	.....	1½ per cent
The Belfast No. 2 Rural District Council	.....	.....	.....	1½ per cent.
The Larne Rural District Council	.....	.....	.....	1 per cent
The Newtownards Rural District Council	.....	.....	.....	1 per cent

1. Amount of Shipping Entering the Port During the year:

TABLE A

	Number	Tonnage	Number Inspected		Number recorded to be defective	Number of vessels on which defects have been remedied	Number of vessels reported as having had during the voyage infectious diseases on board
			By Medical Officer	By Sanitary Officer			
FOREIGN:							
Steamers	313	475,794	58	313	77	66	2
Motors	231	173,226	25	231	34	29	—
Sailing	—	—	—	—	—	—	—
Fishing	—	—	—	—	—	—	—
Total Foreign	544	649,020	83	544	111	95	2
COASTWISE:							
Steamers	7,709	3,718,046	14	1,513	226	214	16
Motors							
Sailing							
Fishing							
NON-TRADING:							
Steamers	298	256,660	—	—	—	—	—
Sailing	—	—	—	—	—	—	—
Total Coastwise	8,007	3,974,706	14	1,513	226	214	16
Total Foreign and Coastwise	8,551	4,623,726	97	2,057	337	309	18

11. Character of Trade of Port:

TABLE B

(a) Passenger Traffic (other than coastwise) during the year:

Number of Passengers	Aliens	British	Total	Refused leave to land
Inwards by ship	73	229	302	4
Inwards by Aircraft	2	15	17	—
	75	244	319	4
				Refused leave to embark
Outwards by Ship	44	350	394	—
Outwards by Aircraft	2	4	6	—
	46	354	400	—

(b) Cargo Traffic:

Principal Imports—Wheat, Barley, Oats, Linseed, Pollards, Timber, Flax, Ores, Paper, Pulp, Iron, Steel, Coal, Cement, Fertilizers, Oil, Flour, Bran, Cattle, Fodder, Tobacco, Glass, Salt, Fruit, Vegetables, Wines, Ales.

Principal Exports—Machinery, Ropes, Linen, yarns, Tobacco, Cigarettes, Potatoes, Grass-seed, Eggs, Poultry, Rabbits, Apples, Live Cattle, Whiskey, Aerated Waters.

(c) Foreign Ports from which Vessels Arrived:

Aalesund, 1; Abo, 2; Adelaide, 1; Algiers, 1; Amsterdam, 3; Antwerp, 19; Archangel, 1; Ballina, 1; Baltimore, 2; Basra, 2; Beira, 6; Beirut, 1; Bergen, 1; Bollsta, 1; Bombay, 2; Bona, 2; Bordeaux, 8; Bougie, 2; Brazil, 1; Bremen, 3; Brisbane, 1; Buncrana, 1; Bunbury, 2; Buenos Aires, 5; Burriana, 1; Calcutta, 2; Caronte, 1; Caripito, 1; Cartagena, 2; Casablanca, 12; Chittagong, 1; Cork, 3; Dar-es-salaam, 1; Delfzyl, 2; Dublin, 35; Dundalk, 2; Dunkirk, 12; Drogheda, 2; Durban, 2; Famagusta, 1; Faroes, 1; Flushing, 1; Freemantle, 4; Galveston, 1; Gandia, 1; Geelong, 1; Genoa, 3; Ghent, 50; Gothenburg, 15; Guernsey, 36; Halifax, 5; Halmstad, 1; Hamburg, 15; Hamina, 3; Hango, 1; Haugesund, 1; Harstad, 1; Helsinki, 1; Honnemelrik, 1; Huelva, 3; Ibisla, 1; Istanbul, 1; Karachi, 1; Kotka, 9; La Platta, 1; Las Palmas, 9; Latakia, 5; Le Havre, 4; Leixoes, 8; Leningrad, 1; Letterkenny, 1; Limasol, 2; Lisbon, 5; Lourenco Marques, 1; Lubeck, 1; Mantyluoto, 2; Marseilles, 2; Mazagan, 2; Montreal, 11; Moville, 1; New Orleans, 1; Newport News, 1; New Westminster, 1; New York, 3; Norfolk, 2; Norrkoping, 2; Novorossisk, 9; Odense, 2; Odessa, 4; Onega, 2; Oporto, 1; Oran, 1; Oslo, 4; Ostend, 7; Oxelosund, 1; Paris, 2; Philippeville, 1; Port Alfred, 1; Propriana, 1; Quebec, 2; Rafso, 1; Rangoon, 4; Reykjavik, 2; Rieme, 2; Rijeka, 5; Rosario, 2; Rotterdam, 56; Rouen, 17; Santos, 2; Stettin, 1; St. Johns, 9; Sibenck, 1; Tahis, B.C., 1; Teneriffe, 7; Torneuzen, 2; Trieste, 1; Tunis, 4; Valencia, 7; Vancouver, 1; Vianna-do-Castello, 7; Wexford, 1; Zanzibar, 1.

The nationality of the vessels which arrived at the Port and were inspected was as follows:—

Argentinian, 1; Belgian, 4; British, 1,694; Costa Rican, 1; Danish, 9; Dutch, 208; Finnish, 9; French, 15; German, 17; Greek, 5; Honduras, 3; Icelandic, 2; Italian, 8; Indian, 1; Liberian, 1; Monrovia, 1; Norwegian, 35; Panamanian, 14; Spanish, 1; Swedish, 21; Swiss, 3; Turkish, 3; Yugo-Slavian, 1.

Medical Inspection of Aliens

Annual Return by the Medical Inspector of Aliens for the Year ended 31st December, 1952

During the year the Medical Inspector (Port Medical Officer of Health) was not requested to medically examine any aliens.

	Total	Number Inspected by the medical officer	Number subjected to detailed medical examination by the Medical Inspector	Lunatic Idiot or M.D.	Undesirable for medical reasons	Physically incapacitated	Suffering from Acute Infectious Diseases	Landing necessary for adequate medical examination	Trans-migrant
(a) Total number of aliens landing at the port	319	—	—	—	—	—	—	—	—
(b) Aliens refused permission to land by Immigration Officer	4	—	—	—	—	—	—	—	—
(c) Transmigrants	—	—	—	—	—	—	—	—	—
Total aliens arriving at the Port	323	—	—	—	—	—	—	—	—

Total number of vessels carrying aliens—73 vessels inwards, 23 outwards=96.
 Total number of aircraft carrying aliens—1 aircraft inwards, 1 outwards=2.
 Number of vessels dealt with by Medical Inspector—Nil.
 Number of aircraft dealt with by Medical Inspector—Nil.

Infectious Diseases Contacts

During the year two contacts of smallpox, 1 contact of typhoid, four contacts of poliomyelitis, whose arrival in Belfast had been advised by other Sea and Air Port Health Authorities, were kept under surveillance for the requisite periods.

TABLE C

Cases of Infectious Sickness Landed from Vessels Including Coastwise Vessels

DISEASE	Number of Cases during 1952		Number of Vessels concerned	Average Number of cases for previous five years
	Passengers	Crew		
Tuberculosis	8	—	7	12
Influenza	—	5	5	1
Chicken Pox	—	2	2	—
Dysentery	—	1	1	—
Typhoid	—	1	1	—

TABLE D

Cases of Infectious Sickness Occuring on Vessels during the Voyage but disposed of prior to Arrival

DISEASE	Number of Cases during 1952		Number of Vessels concerned	Average Number of cases for previous five years
	Passengers	Crew		
Malaria	—	3	1	1
Erysipelas	—	1	1	—

No cases of plague, cholera, yellow fever, or typhus fever occurred, and no plague-infested rats were discovered during the year.

Public Health (Ships) Regulations (Northern Ireland) 1952

These Regulations revoke the Port Sanitary Regulations (N.I.) 1948. The general purport is to bring the measures of control of infectious diseases at ports into conformity with the International Sanitary Regulations (W.H.O. Regulations No. 2). Their general tendency is a relaxation of restrictions on ships and persons, infected or suspected to be infected. It is too early yet, to comment on the efficacy or other wise of the regulations, but it is clear that they cannot guarantee that imported infections will be controlled at the port of entry and that increasing responsibility is placed on the internal Health Authorities of the country.

The Parrots Prohibition of Import Regulations 1930

These regulations were revoked during the year.

Number of Rats Destroyed During the Year

TABLE E

1. On Vessels:

Species	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total in Year
Black	1	2	36	8	—	5	—	—	2	20	16	9	99
Brown	—	14	3	—	—	—	—	—	—	—	—	—	17
Species not recorded	—	—	—	—	—	—	—	—	—	—	—	—	—
Examined	—	—	6	—	—	2	—	—	—	9	—	—	17
Infected with plague	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE F

2. In Docks, Quays, Wharves, Warehouses:

Species	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total in Year
Black	—	—	—	—	—	—	—	—	—	—	—	—	—
Brown	—	16	—	—	4	6	—	5	3	14	8	11	67
Species not recorded	21	—	18	10	—	—	8	—	—	—	—	—	57
Examined	—	—	—	—	—	—	—	—	—	—	—	—	—
Infected with plague	—	—	—	—	—	—	—	—	—	—	—	—	—

The number of rats destroyed in the docks, wharves, etc., as recorded in Table F refers to those which came to the notice of the Port Sanitary Officers.

The sheds and stores on the Harbour Commissioners' Estates, those of the Ship Building Yards, and the Belfast Corporation Harbour Power Station, are baited regularly by private firms under contract, but information on the number of rats killed is not supplied to the Port Sanitary Authority.

During the year the ratproofing of two sheds (used as stores) on the County Antrim side of the port was completed.

Hydrogen Cyanide (Fumigation of Ships) Regulations (Northern Ireland) 1952

These Regulations, which came into force in December, 1952, set out additional safety measures to be undertaken by the operator and port health authority before, during and after cyanide fumigations. While it is not clearly stated who will be responsible for the enforcement of the Regulations, the Authority's port health inspector is present at all ship fumigations and is naturally concerned to see that all safety measures are adopted.

It is pleasing to record that the Ministry of Home Affairs afforded every opportunity to the Port Health Authority to express its views during the drafting of the Regulations.

The advent of the new rodenticide "1080," a potent and dangerous substance but with certain advantages over cyanide, will again throw considerable responsibility on the port health inspectors in the supervision of its use.

TABLE G

Measures of rat destruction on plague "infected" or "suspected" vessels, or vessels from plague-infected ports arriving during the year.

Three such vessels arrived during the year, but no special measures of rat destruction were necessary during their stay in Belfast.

TABLE H

Deratisation Certificates and Deratisation Exemption Certificates issued during the year

Nett Tonnage	Number of Ships	No. of Deratisation Certificates Issued				Total	No. of Deratisa- tion Exemption Certifi- cates Issued	Total Certifi- cates Issued
		After fumigation with			After Trapp- ing Poison- ing, etc.			
		H.C.N.	Sulphur	H.C.N. and Sulphur				
Ships up to 300 tons	8	—	—	—	—	—	8	8
Ships from 301 to 1,000 tons	19	7	—	—	—	7	12	19
Ships from 1,001 to 3,000 tons	6	4	—	—	—	4	2	6
Ships from 3,001 to 10,000 tons	30	9	—	—	—	9	21	30
Ships over 10,000 tons	1	—	—	—	—	—	1	1
TOTAL	64	20	—	—	—	20	44	64

VI Hygiene of Crews' Spaces:

TABLE J

Classification of Nuisances:

Nationality of Vessel	Number Inspected during 1952	Defects of Original construction	Structural Defects through wear and tear	Dirt, vermin and other conditions prejudicial to health
British	1,694	1	124	382
Other Nationalities.....	363	—	36	59

Defects were found as follows:—

Defects of original construction:—

Crews' washplace (refitted)	.....	.....	.....	British	Other Nationalities
				1	—

Defects due to wear and tear:—

Defective decks .....	.....	.....	.....	British	Other Nationalities
				21	7
Defective skylights .....	.....	.....	.....	2	—
Defective portlights .....	.....	.....	.....	28	12
Defective w.c. basins .....	.....	.....	.....	1	3
Defective w.c. joints .....	.....	.....	.....	11	3
Defective w.c. flush and valves .....	.....	.....	.....	6	3
Defective w.c. seats .....	.....	.....	.....	4	—
Defective washbasins .....	.....	.....	.....	4	1

Defective stoves	.....	.....	.....	.....	20	—
Defective stove pipes	.....	.....	.....	.....	14	4
Defective ventilation	.....	.....	.....	.....	7	2
Defective scupper	.....	.....	.....	.....	—	1
Defective radiators	.....	.....	.....	.....	1	—
Defective doors	.....	.....	.....	.....	1	—
Defective flushing tanks	.....	.....	.....	.....	4	—

Defects due to other causes:—

Quarters, washplaces, and galleys required cleaning	.....	101	25
Waterclosets required cleaning	.....	91	14
Quarters, washplaces, galleys, storerooms and w.c. apartments required painting	.....	71	5
Choked waterclosets	.....	—	2
Dirty washbasins	.....	5	—
Scupperpipes required cleaning	.....	9	5
Vermin, etc.	.....	16	8
Bilges required cleaning (attended to during refit)	.....	35	—
Water tanks required cleaning (attended to during refit)	.....	54	—

VII Food Inspection:

Action taken under the Public Health (Imported Food) Regulations 1937—1948, the Public Health (Imported Milk) Regulations 1937 and the Public Health (Preservatives, etc. in Food) Regulations 1927—1940

During the year all sheds and warehouses at the Port, where food is landed or stored, were inspected regularly for the detection of unsound food. The quality of the food which arrived at the port during the year maintained a high standard.

Unsound Food

	Ton	Cwt.	Qrs.	Lbs.
Apricots	—	—	1	12
Bananas	9	11	3	27
Curry Powder	—	—	—	14
Cocoa	—	—	—	7½
Currants	—	—	—	6
Chicken (tinned)	—	—	—	3¼
Fish	—	1	1	7
Flour	—	4	1	—
Hops	—	—	—	5
Maccaroni	—	—	1	12
Peaches	—	—	—	25
Rice	—	1	0	8
Shredded Wheat	—	—	—	4
Sago*	—	—	2	14
Valencias	—	—	1	2
Vermecilla	—	—	1	22
Yeast	—	—	—	5
Weeties	—	—	1	21½

No Milk is imported, but large quantities of fresh milk are exported to the Cross-Channel ports by the Ministry of Agriculture for Northern Ireland.

REPORT ON SANITARY SECTION BY CHIEF SANITARY OFFICER.

The work of the inspectorial staff is concerned largely with environmental hygiene in the home, shop, office or factory; and the purity and cleanliness of food, together with rodent and insect pests control. Under normal conditions, the administration of the manifold statutory and other responsibilities in these fields of activity is so planned as to preserve a balance between preventive and remedial action. It continues to be necessary, however, to direct the activities of the staff—still seriously depleted in numbers—to matters arising from an increasing volume of applications for rent restriction certificates of disrepair, and reports to agents in connection with such certificates, as well as complaints received from the public.

During the year 16,045 applications were received for inspections to be carried out under the Rent Restriction Law (Amendment) Act (Northern Ireland) 1951, in addition to 59,446 nuisances complained of and discovered, all of which necessitated action under the Public Health Acts, as against 10,633 nuisances complained of and discovered during 1938. In order to keep pace with the ever-increasing number of complaints received, it was found necessary to work the inspectorial staff 12,911½ hours over and above their normal working hours: this entailed an additional outlay of £3,923 18s. 2d.

Complaints now relate mainly to conditions arising from structural and sanitary defects in dwelling houses, many of which are within potential clearance areas and remain occupied only by reason of the serious shortage of housing accommodation.

The large volume of complaints and the increased amount of work involved in subsequent remedial action, has created a position in which many statutory duties, designed to prevent the development of unhygienic conditions, cannot be adequately fulfilled. It is evident that in many instances, where requests have been made for inspections to be carried out under the Rent Restriction Acts, the accumulated defects in dwelling houses discovered on inspection, have developed as a result of owners failing to execute systematic maintenance of a preventive character.

A detailed survey of houses used as tenement dwellings was carried out during the year, when it was revealed that 924 families were housed under such conditions that each family occupied a single room for living and sleeping. In last year's Annual Report I referred to this type of dwelling, and suggested that the only satisfactory means of control would be the introduction of special legislation. (See separate report under tenement dwellings).

There has been no relaxation in the effort to consolidate the hygienic improvements of food premises which have been established during the past years. The policy pursued by the Department since the introduction of the Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) 1948, has been to aim at a high structural standard. This standard, which was frequently resisted during the initial stages, has now become normal practice, and is not only accepted by many proprietors as a necessary minimum, but also as a desirable factor on business and hygienic grounds. It is the aim of the Department to see that the structural conditions and services are such that the basic requirements, *e.g.*, scrupulous cleanliness, effective ventilation, adequate lighting and hot and cold water supplies laid on, are satisfactorily maintained, and sufficient evidence is forthcoming to indicate that these improvements are now considered by many to be sound economical factors. Every advantage is taken of this knowledge in order to press for improvements in this direction whenever the character of a business would find them to be of hygienic value.

The public health control of food hawkers is difficult as the Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) 1948, are not appropriate for dealing with street traders. Most of the provisions of the regulations refer to structural requirements for food premises and these cannot be applied to handcarts and vehicles, as the definition of room and premises does not cover such vehicles. Street vendors found to be handling food in an unhygienic manner and causing contamination of same are liable to legal proceedings. It is rare for inspectors to find hawkers causing contamination, especially when they are aware that an inspector is supervising their methods of handling. From time to time prosecutions have been made for failing to take all reasonable precautions to prevent contamination, *e.g.*, dirty hands and clothing or dirty carts; depositing of foodstuffs on dirty ground or in positions in which it is liable to contamination by animals. It is evident that special legislation is necessary for the public health control of the sale of food in the open air. Representations have been made to the Ministry of Health and Local Government to the effect that, in the pending introduction of legislation to deal with the Sale of Food and Drugs in Northern Ireland, provision should be made for regulating the sale of food in the open air. It is expected that a Bill dealing with the matter will be introduced in the Northern Ireland Parliament at an early date.

During the year the Department was concerned with the unsatisfactory conditions at the Belfast markets with regard to deposit, preparation and sale of foodstuffs. Arising from the conditions, it was considered necessary to institute legal proceedings in a number of instances. In addition the Health Committee made strong representations to the Estates and Markets Committee with a view to the provision of a proper building where foodstuffs could be deposited and sold without risk of contamination, and where proper amenities could be provided for personal cleansing of the persons engaged in handling foodstuffs.

Severe flooding was experienced during the year, which necessitated the evacuation of the occupants of a large number of dwelling houses to school buildings well clear of the flooded area. At midnight on Saturday, 9th August, Donegall Road was flooded from Rodney Parade to Monarch Street, and by Sunday morning the flooding had extended from St. James Park to Meridi Street, involving 1,685 dwelling houses. By Monday morning the flooding had subsided to a stretch between Rodney Parade and Broadway, and by the late afternoon the whole area was pretty well cleared of water. Flooding of the Donegall Road area was due to the Blackstaff River course not being able to discharge the exceptional flow from 3.48 inches of rainfall over a period of 48 hours, which, over the catchment area, was equal to a quantity of 636,000,000 gallons of water. At the height of the flooding all that could be done was to keep the various bridges and culverts along the Blackstaff River free from obstruction: this work was carried out by the City Surveyor's Department. The flooding at Flax Street area was due to very exceptional flow in the river adjoining. From Monday 11th until Saturday, 16th August, officers from the Health Department carried out inspections of dwelling houses in the flooded areas and discovered many foul sewers, drains and gully traps in addition to dirty streets, passages and dwelling houses. These were reported to the City Surveyor and immediate action was taken to cleanse same. During the week 200 gallons of disinfectant were distributed to the occupants in the areas. In exceptional cases dwelling houses were washed, cleansed and disinfected by members of the Pests control staff. There were many cases where flooding occurred in the cavity underneath the ground floor (wood). These were listed and forwarded to the Belfast Fire Service, who carried out the work of pumping and mopping up. After the cavities had been cleared of water the spaces were disinfected.

Sewerage and Sewage Disposal

The system of sewerage and sewage disposal is under the control of the City Engineer and Surveyor. All areas of the City, with the exception of isolated premises on the outskirts, are connected with the sewerage system. Sewage is collected by means of high and low level main sewers and discharged into the outfall works situated adjoining Belfast Lough. It is screened and passed through detritus chambers before entering the sedimentation tanks. Sludge from the sedimentation tanks is pumped to a sludge steamer and is taken to sea and deposited in deep water. The effluent, after passing to the storage ponds, is discharged during the first three-and-a-half hours of the ebb tide at a point one mile from the shore. Owing to the contours of the land on which Belfast is built, much of the sewage must be pumped.

During the year the first section of the new Knock Valley sewer was completed and a tender accepted for the second section. The two sections, when completed, will provide some two miles of main trunk sewer varying from five feet to three feet diameter, to provide for new housing development taking place in this area of the City. Other main sewers have been laid in the Shore Road and Lisburn Road areas, whilst a large number of street sewers have been relaid in connection with street resurfacing schemes.

The construction of a new pumping station at Sunnyside Street has commenced and pumping plant is being manufactured for Sydenham Pumping Station. Tenders have been invited for the manufacture and erection of pumps to replace existing plant at Greencastle Pumping Station.

The design and preparation of drawings for the proposed new high-level intercepting sewer have been completed and the design of the proposed sewage outfall works at Kinnegar has progressed.

In addition to the main schemes mentioned above, a large amount of maintenance work has been carried out throughout the year, involving the relaying and repair of defective sewers; overhaul and partial replacement of pumping and screening plant; and the maintenance of the Corporation Sludge Steamer.

Refuse Collection and Disposal

This service is carried out by the City Surveyor's Department by means of direct labour, under the control of the Cleansing Superintendent. There are over 131,000 ashbins in use in the City and these are cleansed on a weekly basis, while in the centre of the City trade refuse is removed daily.

During the year the first blocks of flats were occupied. House refuse from the upper floors is emptied into chutes which discharge into standard dustbins situated in enclosed cubicles at ground floor levels: this allows a free discharge of the refuse from the chutes into the containers. The chutes are well constructed, being lined with glazed stoneware pipes nine inches in diameter, and equipped with metal airtight sealed hoppers designed to prevent the discharge of dust: they allow free ventilation and are accessible for thorough cleansing. Arrangements are made for cleansing the chutes and appurtenances at least once weekly. The usual causes of complaint from dust chutes are (1) spillage at the hopper and (2) dust coating on brickwork around the storage apartment. Contracts were completed for the supply of eight new vehicles which will improve the standard of the refuse collection fleet.

The supply of new ashbins remained good: these can be obtained by the public from the Corporation on terms of hire, or purchase outright. A Government Order remained in force prohibiting the galvanising of ashbins; the receptacles are painted before being put into service.

The disposal of house and trade refuse is mainly on tipping grounds situated at different parts of the City, while approximately 120 tons per week are incinerated in the Refuse Destructor Works, Laganbank Road. In order to minimise fly breeding, ashbins were sprayed from May to October with a solution of D.D.T. each time after being emptied, while tipping grounds were treated during this period with either D.D.T. or Gammexane. During the year 52 inspections were carried out by Sanitary Officers to the nine tipping grounds within the City Boundary.

Water Supplies

Control of the public water supply is vested by Act of Parliament in the Belfast City and District Water Commissioners, who supply all domestic water with the exception of a few houses on the outskirts of the City where no public water mains are yet provided. The supply is derived from three main catchment areas:

1. Mourne Catchment and Works:

The catchment area of the Kilkeel and Annalong Valleys, consisting of upwards of 9,000 acres of mountain slopes, is free from human habitation. The storage reservoir has a maximum width of half-a-mile and a length of two-and-a-half miles. It is capable of storing 3,000,000,000 gallons of water. The Knockbracken service reservoir is situated about five miles from Belfast and has a capacity of 100 million gallons. The water is chlorinated at this point before passing to the consumer.

2. Woodburn Catchment and Works:

This catchment area consists of some 6,937 acres of uplands and is almost entirely clear of human habitation. The works comprise seven storage reservoirs, from which the water is conveyed to two service reservoirs at Oldpark, Belfast.

3. Stoneyford Catchment and Works:

This catchment consists of uplands, with an area of some 5,348 acres and, as in the case of the Woodburn catchment, these lands are largely owned by the Commissioners, and contain few human habitations. The yield of water from this catchment is equal to an average of about three million gallons per day.

There are two springs, one at Whitewell and the other at Ligoniel. These springs are situated close to the City and the supply obtained from them averages 200,000 gallons per day. By reason of the altitude of the springs, these waters are put into consumption in the higher levels of the City at Ligoniel and the northern sections of Antrim Road.

During the year the Slieve Bignian tunnel was opened. The tunnel brings the waters of the Annalong River into the Silent Valley Reservoir, and is a valuable addition to the City's supply, as it will guarantee a further five million gallons per day, even in the driest seasons.

In order to ensure adequate supplies to new housing estates, work was started in the summer on a contract for a new trunk main to carry water from one of the main Mourne feeders at the Forster Green Hospital to the Knock area. This entails the laying of approximately three miles of thirty inch diameter pipes and three quarters of a mile of eighteen inch diameter pipes.

In west Belfast work on the Whiterock pumping scheme, comprising the construction of two covered concrete reservoirs, pumphouse and pipe network, is well advanced and should be in operation during the year 1953. General maintenance work has been continued. Pipes have been relaid wherever necessary, and close liaison is kept with the Belfast Corporation in order that such work is carried on in advance of their street reconstruction schemes.

Another important service of the Commissioners is the supply of water to the shipping using the port and harbour of Belfast.

Routine bacteriological examinations of all waters were made by Professor W. J. Wilson, B.A., M.D., D.Sc., D.P.H., Director of Water Examinations to the Water Commissioners, and copies of the results were submitted monthly to the Medical Officer of Health for his information. The following is a summary of returns of samples of water taken from consumer taps by inspectors employed by the Belfast Water Commissioners:—

Total number of samples taken	1,113
Total number of samples showing +	454
Total number of samples showing bacillus coli at 37° C.	454
Total number of samples showing faecal coli at 44° C.	216

In addition 308 samples were taken from consumers' taps in the City by Sanitary Officers, and submitted to the Public Health Laboratory of the Northern Ireland Hospitals Authority for bacteriological examination: 199 of these samples were reported as highly satisfactory and, of the remaining 109 samples, 67 were found to be suspicious because of the presence of coliform organisms in a chlorinated and filtered supply, and 42 were found to be unsatisfactory because of the presence of faecal coli in addition to coliform organisms.

The suspicious and unsatisfactory samples are classified as follows:—

Coliform Organisms Count per 100 ml.	Number of Samples	Coliform Organisms of Faecal Origin Count per ml.	Number of Samples
1—2	45	1—2	16
3—10	19	3—10	20
Greater than 10	3	Greater than 10	6
Total	67	Total	42

The Medical Officer of Health took a serious view of the number of unsatisfactory reports received, as he felt that bacillus coli or coliform organisms should not be present in a chlorinated water supply, as is laid down in the Ministry of Health's report on the bacteriological examination of water No. 71. He also expressed concern as to the possibility of pollution of water derived from the Whitewell spring. This spring is situated within a short distance of a row of dwelling houses which are built on the edge of a disused limestone quarry, and which are at a higher ground level than the spring. There is no laid-on sewerage system to these houses, and dry closets are in use. Owing to the low-lying situation of the spring in relation to the houses, there is a potential risk of pollution of the water in the well. A report on these unsatisfactory conditions was made to the Health Committee who directed that a copy be sent to the Water Commissioners and to the Ministry of Health and Local Government. By the end of the year there was a marked improvement in the purity of the water as supplied to consumers.

During the year 18 samples of water were taken from private wells for bacteriological examination. The bacteriologist returned 14 of these samples as highly satisfactory and 4 samples as unsatisfactory due to the presence of faecal coli. Negotiations are taking place with a view to acquiring an alternative supply of wholesome water.

Public Swimming Baths

There are four public swimming baths situated at Templemore Avenue, Ormeau Avenue, Falls Road and Peter's Hill, each having first and second class swimming pond accommodation: in addition there are 168 slipper baths provided. With the co-operation of the General Superintendent of Baths.

the Medical Officer of Health has been enabled to continue the supervision and scientific control of the purity of the water in the ponds. 142 visits of inspection were made to all the baths and samples of water were taken for bacteriological examination at the Public Health Laboratory of the Northern Ireland Hospitals Authority. An analysis of the samples is appended.

Number of Samples taken	Result of Examination	
	Satisfactory	Unsatisfactory or suspicious due to the presence of coliform organisms
152	137	15

198 samples of water were also examined at the baths by Sanitary Officers to determine the degree of acidity-alkalinity, and the amount of free residual chlorine present in the water. The filtration system provided at all baths except Peter's Hill is capable of a turn-over of the pond water every four-and-a-half hours.

Although most of the pollution of swimming-bath water is caused by the bathers themselves, appreciable contamination may occur where the floor surrounding the pond is used by the bathers proceeding to the dressing boxes. Much pollution could be eliminated if bathers were compelled to utilise the showers and footbaths provided.

Most of the bacteria conveyed by bathers to the water are non-pathogenic, and indeed greater risks to health lie in the overcrowding of the pond and in the indiscriminate use of towels. Adequate ventilation and the prevention of overcrowding are as essential as filtration and chlorination of the water in the pond. On these grounds the Medical Officer of Health recommended certain working conditions which included a reduction of hours of opening the ponds to the public, limitation of number of bathers to 40 per half-hour, extended operation of the filtration plant after closing hours and a longer "quiescent" period.

During the year first and second class ponds at Falls Road baths were converted to "Break-Point Chlorination" treatment of the water. It is claimed that the safety of the water for bathers is increased appreciably by this treatment, which ensures the presence of a reserve of free available chlorine in the water. This is very active bactericidally as compared with the indefinite compounds of chlorine and nitrogen which provide the sterilisation agent in marginal treatment, and it is generally established that free chlorine is about fifty times as rapid in action as the latter. Furthermore, it is possible to build up a sufficient reserve of free chlorine to cope with a sudden increase in load and hence in pollution without causing any offence to bathers. The appearance of the pond is improved, the usual effect of break-point application being to change the colour of the water from green to a light blue and to increase the clarity, sparkle and general attractiveness of the water. It is claimed that complaints often associated with marginal treatment can be avoided if break-point treatment is applied and properly controlled with respect to chlorine residual and the pH of the water. 19 samples of water were obtained from open-air swimming ponds by Sanitary Officers for bacteriological examination at the Public Health Laboratory. The Bacteriologist reported 13 samples as satisfactory and 6 samples as unsatisfactory or suspicious due to the presence of coliform organisms. The Medical Officer of Health made representation to the Parks and Cemeteries Committee, through their Director, requesting that consideration be given to improving the condition of the water at Falls Park Open Air Swimming Pond, as it was dangerous for bathers due to the presence of faecal coli.

The supply to this pond is obtained from a mountain stream which passes through fields and meadows where cattle are grazed and where there is danger of pollution. The present method adopted to deal with impurities, during the season when the pond is open to the public, consists of adding liquid chloros and copper sulphate crystals to the pond water. It would appear from the unsatisfactory bacteriological examination reports that the only satisfactory solution to the problem would be the provision of proper means of mechanical filtration and aeration.

Housing

The object of all housing legislation and reform should be to secure the provision of a separate dwelling of a modern standard amenity for every family. At 31st December the Estates Department had a waiting list of 20,000 persons all seeking housing accommodation. The fulfilment of such an objective

presents a tremendous task, especially when almost all the available building space within the City boundary has already been built upon. The compulsory and prolonged sharing of houses by different families causes not only inconvenience but leads to frustration and discomfort which reveal themselves in neurotic types of illness and unhappy and broken homes.

Prior to the outbreak of World War II, it was possible to deal with unfit houses by either having the same brought up to a reasonable standard, or, alternatively, making representation to the Health Committee for a demolition order under the Planning and Housing Act (Northern Ireland) 1931. The picture is somewhat different today. Because of the lack of accommodation in the City, we find more and more houses are being let in lodgings, with the result that many persons take advantage of the hardship of others. The total number of permanent dwelling houses completed and occupied during the year was 1,084: in addition 137 flats were provided. Of this total 588 dwelling houses and 126 flats were provided by the local authority, and 496 dwelling houses and 11 flats were provided by private enterprise. At the 31st December the total number of houses provided and owned by the Belfast Corporation since the commencement of Local Authority Housing Schemes was 4,496. These houses are classified as follows:

Permanent Houses	.....	.....	.....	.....	.....	.....	3,130
Temporary (prefabricated) houses	.....	.....	.....	.....	.....	.....	1,000
Re-built " blitzed " houses	.....	.....	.....	.....	.....	.....	11
Temporary Converted (huttred) accommodation	.....	.....	.....	.....	.....	.....	193
Flats	.....	.....	.....	.....	.....	.....	162

Tenement Houses

A recent survey of the known tenement houses was carried out in the City: this revealed the following information:—

Total number of tenement houses inspected	.....	.....	.....	218
Total number of families occupying same	.....	.....	.....	924
Total number of adults occupying same	.....	.....	.....	1,956
Total number of children occupying same	.....	.....	.....	867

The chief points that give rise to serious concern from a public health viewpoint are (1) gross overcrowding; (2) unsatisfactory water supply; (3) lack of adequate and sufficient domestic facilities and equipment for cooking and washing; (4) low standard of cleanliness prevailing. Most persons who occupy these tenements are of the low-income group: quite a few are aged persons, others have never known any kind of life or standards other than their present existence. A large proportion, judging by the inadequacy of the accommodation and overcrowding, fully justify consideration for rehousing in new estates.

Some of the houses are controlled by property agents, and some directly by the actual owners, or through principal tenants. In some instances the principal tenant has rented the house from an agent and then sub-let the rooms at exorbitant rents. In few cases is there any evidence to show that the agents, owners or principal tenants have any interest in maintaining the property in good repair, decoration or cleanliness: in fact, the principle that would appear to control their interest in the property is the maximum income from it, with the minimum expense and trouble, regardless of the rate of deterioration of the property, and the low standard of accommodation provided. The majority of the houses are of the large terrace type of three or four storeys. The common defects met with during the survey consisted chiefly of roofs, spoutings, interior plasterwork and woodwork. The gross overcrowding and the failure on the part of the owners to carry out routine maintenance work has reduced the life of this property considerably. Gross overcrowding exists in the majority of the houses: this can be attributed to the present housing shortage in the City. During the survey it was found that families consisting of five, six or more persons were living and sleeping in a single room with little or no domestic facilities.

In quite a number of houses it was found that the occupiers of the upper portion of the house were using water from the bath taps for domestic and drinking purposes; this supply, whilst originating from the public mains, passed through a storage water tank.

Where gas cookers are available they are shared, usually, with other occupants of the house: some have gas-rings fitted in their rooms; others have no cooking facilities except the bedroom firegrate which was designed for space heating, and not for cooking purposes.

In most houses two sinks and two waterclosets were provided, but where the kitchen and scullery are let as a separate dwelling, the occupants of the upper parts of the house are restricted to the use of the sink and watercloset in that part of the house. Refuse bins, where they are provided, are usually kept on the landing or in the hallway, as most of the occupants on the upper floors have no free access to the kitchen, scullery or yard.

In general, a low standard of cleanliness prevails in these tenement houses. Little success attends the usual procedure of issuing statutory notices under the Public Health Acts as overcrowding and the lack of washing facilities make it almost impossible for a reasonable standard of cleanliness to be maintained. This type of dwelling house requires constant inspection by the Sanitary Officer in an endeavour to mitigate the extremely bad conditions.

Rent Restriction Law (Amendment) Act 1951

The Act permits increases in the rents of controlled houses which are in good and tenantable repair and the present rents of which were fixed prior to the 2nd September, 1939. Other provisions of the Act include amendments of existing law affecting statutory tenancies, the right of a landlord to secure possession of a house for his own occupation or for occupation by members of his family, and the removal of the application of the Rent Restrictions Acts to certain houses provided by Local Authorities. Section 3 of the Act specifies the functions of Local Sanitary Authorities in regard to the issue to tenants of certificates of disrepair, and to landlords of reports as to the satisfactory completion of necessary repair works. Under sub-section (4) of this section a tenant may apply to the Sanitary Authority for a certificate that his house is not in a reasonable state of repair. Where a tenant has obtained such a certificate, and has served a copy thereof on the landlord, it will be a good defence to any claim against the tenant in respect of the non-payment by him of any of the permitted increases referred to in the sub-section. Sub-section (5) requires the Sanitary Authority to specify the works which are necessary in order that the house may be put into a reasonable state of repair. Sub-section (6) provides for the issue by the Sanitary Authority to a landlord, on application by him when he has executed the repair works to the satisfaction of the Sanitary Authority, of a report to that effect. Sub-section (7) provides for the payment of one shilling for a certificate or report, as the case may be, by the applicant. Sub-section (9) gives the landlord and tenant the right of appeal to the County Court. A landlord's right relates to the reasonableness of the requirements of the Sanitary Authority with regard to the works of repair required to be carried out as enumerated in a certificate of disrepair. A tenant's right relates to the refusal of the Authority to grant a certificate.

Applications for Certificates and Reports during 1952	.....	.....	16,045
Total number of Certificates issued to tenants during 1952	.....	.....	11,090
Total number of reports issued to agents during 1952	.....	.....	3,103
Total number of refusals of reports to agents during 1952 as all the works specified on Certificates issued to tenants had not been completed	.....	.....	1,843
Total number of Certificates refused to tenants during 1952 as the dwelling houses were found to be in " good and tenantable repair "	.....	.....	280

It will be observed that a greater number of certificates and reports was issued and refused than actual applications received during the year. This is accounted for by the number of applications outstanding on 1st January, 1952. It would appear from the above figures that application of the Act is a permanent and established feature of the Department's work, as the certificate may include many matters which cannot be made the subject of a sanitary notice under the Public Health Acts.

It has not been possible, owing to the huge volume of work arising under the Act, to carry out any systematic re-inspection of premises in respect of which certificates have been issued and for which reports have not been requested. Only by working considerable overtime has it been possible to keep up with the demand for certificates and reports.

During the year 388 Corporation-owned houses were inspected at the request of the Estates Committee, and a detailed report prepared of the defects found; these referred to roofs, spoutings, windows and cement rendering to external walls. In a few instances ground dampness was observed. Most of the defects were of a minor nature.

SANITARY SECTION.

Proceedings under the Public Health Acts

Nuisances Discovered and Complained of:

NUISANCES (A) Discovered (B) Complained of	DIVISIONS								Total	
	North		South		East		West			
	A	B	A	B	A	B	A	B	A	B
Drains, Traps, etc., foul or defective	192	655	74	201	355	754	358	568	979	2,178
Tiling, Paving or Flooring defective	211	1,454	101	572	301	1,452	96	1,179	709	4,657
No watercloset accommodation	3	11	—	—	—	5	91	11	94	27
Waterclosets, foul or defective	222	1,416	83	457	231	1,375	83	1,421	619	4,669
No ashpit accommodation	10	65	—	6	1	46	97	61	108	178
Sink wastepipes defective, or want of	40	211	13	38	44	145	13	177	110	571
Ashpit defective, dilapidated or un- suitable	9	52	—	24	6	76	13	64	28	216
Soil or ventilating pipes defective or want of	7	10	—	2	1	9	4	2	12	23
Roofs or spouting defective or want of spouting	769	5,745	347	1,259	995	3,605	187	3,700	2,298	14,309
Premises dirty	5	30	1	6	9	50	13	23	28	109
Houses of premises damp	251	4,324	222	1,236	630	3,575	205	3,265	1,578	12,400
Insufficient light or ventilation	17	105	2	3	10	21	10	31	39	160
Offensive smells.....	1	27	2	31	63	193	—	34	66	285
Fowl or animals kept	—	29	1	8	1	34	6	4	8	75
Accumulation of manure or other offensive matter	5	69	7	42	71	259	54	25	137	395
No domestic water supply, or im- proper	2	8	—	8	1	18	2	1	5	35
Black Smoke	—	—	—	2	—	2	—	1	—	5
Passages dirty	2	6	—	4	3	22	15	31	20	63
Schools filthy	—	2	2	—	3	—	2	—	7	2
Houses overcrowded	—	1	—	—	—	1	—	—	—	2
Schools overcrowded	26	—	19	1	34	1	14	—	93	2
Miscellaneous	503	4,339	115	707	418	2,391	152	3,522	1,188	10,959
GRAND TOTAL							.....			59,446

Nuisances Abated

Nature of Nuisance	DIVISIONS				Total
	North	South	East	West	
House drains cleansed	744	673	794	501	2,712
House drains repaired	82	290	191	67	630
Length in feet of drain pipes laid	104	68	510	128	810
Gully and disconnecting traps put on house drains	3	7	7	4	21
Houses had the tiling, paving or flooring repaired	1,839	2,134	2,115	1,599	7,687
Waterclosets repaired	2,334	1,690	1,633	1,808	7,465
Ashbins provided	122	110	124	126	482
Houses that were overcrowded had number of inmates reduced	—	1	—	—	1
Houses have had the roofs repaired	5,402	3,747	3,969	3,598	16,716
Houses have had the spouting repaired	4,454	2,382	2,253	2,579	11,668
Houses have been cleansed	11	36	21	7	75
Passages cleansed	13	13	6	3	35
Houses have had minor repairs effected	6,105	5,450	2,869	3,847	18,271
Miscellaneous nuisances abated	8	80	46	18	152

General Summary

Total number of sanitary complaints received during the year	51,320
Total number of sanitary complaints discovered during the year	8,126
Total number of inspections carried out in respect of nuisances	130,090
Number of statutory notices issued	31,563
Number of sanitary improvements carried out	66,725

By-Laws made under Section 23 of the Public Health Acts (Amendment) Act 1890, relating to Keeping Waterclosets Supplied with Sufficient Water for Flushing.

Total number of inspections carried out	.....	.....	.....	.....	1,167
Total number of notices issued	.....	.....	.....	.....	920
Total number of summonses issued	.....	.....	.....	.....	83

Keeping of Animals

Stables within the City are systematically inspected by the Sanitary Officers, constant attention being paid to the frequency of removal of manure and to general sanitation.

Total number of stables on register	.....	.....	.....	.....	257
Total number of inspections carried out during the year	.....	.....	.....	.....	1,477

Private pig-keeping continues to increase and the number of pigs now being kept within the City Boundary is very considerable. Sanitary officers carried out systematic inspections as well as attending to complaints received. All complaints were investigated and appropriate action taken. Piggeries are controlled by By-Laws made under Section 54 of the Public Health (Ireland) Act 1878; in addition all pig-keepers must be licensed by the Ministry of Agriculture under the Swine Fever (Belfast) Order 1936.

Total number of piggeries on register	.....	.....	.....	.....	101
Total number of inspections carried out during the year	.....	.....	.....	.....	1,427
Number of piggeries registered during the year	.....	.....	.....	.....	4

Burial Grounds

Under the Public Health (Ireland) Act 1878, visits and inspections of burial grounds were made by Sanitary Officers for the protection of the public health and the maintenance of public decency.

Total number of burial grounds in city	.....	.....	.....	.....	10
Total number of inspections carried out by sanitary officers	.....	.....	.....	.....	56

In addition 7 exhumations and re-internments took place at cemeteries within the city in accordance with licences issued by the Ministry of Health and Local Government. In all cases the exhumation was conducted with proper regard for public health and decency.

Offensive Trades

These businesses require careful and regular supervision largely because of their nature and the offensive condition of the raw materials used. There are ten such businesses in the City which are registered as offensive trades, consisting of four hide and skin merchants; one fat melter, hide and skin merchant; three soap boilers; one gut scraper and one bone boiler. The By-Laws for registration of these trades require the prevention of offensive effluvia, the inoffensive disposal of obnoxious waste, the limewashing of ceilings and walls, the cleansing of floors and utensils, thorough flushing of the drains and the maintenance of the premises in good order and repair.

Total number of inspections carried out during the year					75
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Atmospheric Pollution

The work in connection with smoke abatement is still carried out by Sanitary Officers having other duties to perform. The primary object of the Department in carrying out smoke observations of industrial chimneys is to reduce, if possible, the degree of atmospheric pollution consistent with the considerations of fuel economy and efficiency. During the year complaints of nuisances from smoke and grit were investigated. 255 timed observations were carried out, and in 12 cases black smoke was emitted for 2 minutes or more in the aggregate in a continuous period of 30 minutes. In each case the premises were visited and the persons responsible for the management of the plant warned verbally. Further observations necessitated the serving of statutory notices in five instances; these were kept under observation until improvements were carried out. There are approximately 274 factory chimneys in the City.

Cinemas, Theatres, Etc.

Total number in City	43
Total number of inspections (including evening inspections)	357

Routine inspections were carried out during the year to ensure the proper cleansing of premises, seats, staff rooms and sanitary conveniences, and the maintenance of suitable and sufficient sanitary conveniences for the use of patrons and employees. In addition 139 special inspections were made to check the efficiency of ventilation and heating systems, by tests using the Kata Thermometer and a Hygrometer. In 18 cinemas unsatisfactory results were recorded; this necessitated representations being made to the management calling for structural alterations to improve conditions.

In most cases improvements were being carried out at the end of the year. The majority of places of entertainment supply ice-cream, soft drinks and sweets to patrons. A number of proprietors have now constructed attractively designed stalls in the foyers to the premises. Attention has been given by the food inspectors to the storage of such foodstuffs and the provision of a wash-hand basin with a supply of hot and cold water laid on, also the provision of soap and clean towels for the exclusive use of persons handling foodstuffs.

Dance Halls

There are 64 premises licensed for public dancing, singing, music, boxing and other public entertainment of a like nature, under Section 31 of the Local Government Act (Northern Ireland) 1934. In addition there are approximately 150 premises where entertainment is carried on. Admission to these premises is by membership card.

During the year an attempt was made to carry out a survey of all dance halls but, owing to continued shortage of staff, this project was temporarily abandoned. The following is a summary of conditions found in 30 premises inspected:—

Insufficient ventilation	2
Dirty and defective conditions	2

Sanitary Accommodation

Sanitary conveniences not provided with proper intervening ventilated space	4
Sanitary accommodation not provided for each sex	2
Sanitary conveniences not properly screened	2
Sanitary conveniences in a defective condition	4
Sanitary conveniences in a dirty state	1

Statutory notices under Section 73 of the Belfast Improvement Act, 1878, as extended by Section 69 of the Belfast Corporation Act, 1911, were served on occupiers for the above defects, most of which were remedied at the end of the year.

Inspection of Primary and Secondary School Buildings

During the year Sanitary Officers carried out routine inspections of all schools under the control of the Belfast Education Committee and also voluntary schools under management control, for the purpose of detecting sanitary defects and overcrowding. Where nuisances not of a structural nature were discovered, contact was made with the principal of the school concerned, and remedial measures carried out. Defects of a structural nature were dealt with through administrative channels to the Director of Education in the case of county primary and secondary schools, and to managers of voluntary schools.

For a number of defects in school hygiene, such as over-crowding, there is only one solution and that is the implementation of the Education Authority's building programme as quickly as possible. Apart from the relief of overcrowding this would allow the replacement of several unhygienic premises, which have long outlived their usefulness, by modern schools in the design of which hygiene principles have received adequate attention. A detailed survey of a number of schools was carried out and representation made concerning insufficient or unsuitable sanitary accommodation and insufficient washing accommodation.

Number of primary and secondary schools	109
Number of voluntary schools	69
Number of special and nursery schools	11
Number of inspections carried out by sanitary officers	648
Number of defects discovered by sanitary officers	84
Number of complaints received from school health services investigated	132
Number of intimations concerning defects sent to Director of Education	71
Number of intimations concerning defects sent to Managers, etc.	72
Number of sanitary improvements carried out to school buildings	24

Public Sanitary Conveniences

There are 77 public sanitary conveniences throughout the City (including those in Parks and Playgrounds). Some of these are of modern design, and some are of the old cast-iron structure type of urinal. The latter are antiquated and cannot be said to be wholly satisfactory from a public health viewpoint. In fact, the need for providing more modern-type sanitary accommodation on the whole is long overdue, particularly in the city centre.

Number of inspections carried out with regard to cleanliness	562
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Drain Tests

It was necessary to carry out 438 drain tests (including tests made by Pests Control Officers). 281 of these were in connection with complaints of nuisances arising from the ingress of rats into premises. 204 showed defects by smoke machine tests; 154 of this number showed defects on complaint of rats, and the remaining 50 on complaint of offensive odours. A statutory notice under the Public Health Acts was served on the owner in each case where defects were discovered and repairs were subsequently carried out. New drains laid in place of those found to be defective were tested by the water test.

Provision of Ashbins (Section 44 of the Belfast Corporation Act 1930)

The Corporation may by notice in writing require the owner or occupier of any dwelling-house, warehouse or shop, from which the Corporation undertake, or may be required to remove any house or trade refuse, to provide and maintain in good order and condition dustbins for the convenient removal of such refuse, and such dustbins shall be of such size and construction as may be approved by the Corporation.

Number of notices served under the above section	325
Number of summonses for non-compliance with notice	15
Number of ashbins provided during the year	482

Marine Stores

The present legislation is found in the Public Health Acts 1878 to 1907, and By-Laws with respect to offensive trades in rags, bones, etc. "Marine Store" is the general term used to describe stores where various types of waste collection are carried on, including stores used by rag dealers, rag and bone merchants, general dealers, waste merchants, metal merchants, etc. There are 113 persons licensed to carry on business as a general dealer under the General Dealers (Ireland) Act 1903. Most marine stores have ceased to collect bones and now confine the business to the collection of rags, waste materials, old feathers, hair fibre, flock, glass jars, bottles and scrap metals.

From a public health aspect it is important that such trades should receive special attention, as most of the articles collected are salvaged and again used.

Street hawkers collect rags, bottles, jars, etc., from such places as refuse tipping grounds, ashbins and dwelling houses. These are sold to marine store keepers where they are sorted, graded and stored until sufficient quantities have accumulated to warrant removal. The materials are soiled,

dirty, infested with insects and sometimes vermin; and for this reason it is essential to carry out rigid inspection to ensure that danger to public health is reduced to a minimum.

Number of marine stores in City	31
Total number of inspections carried out	286

Rivers

During the year trouble was experienced by the discharge of effluent into the Blackstaff river from a newly constructed sewage disposal works adjoining the Belfast City Boundary. Result of analysis of samples taken from the river revealed the actual presence of solid faecal matter in the effluent. Representations were made to the local authority concerned and an attempt was made to improve conditions. It was suggested that the unsatisfactory conditions were due to certain trade wastes. Subsequent samples of the effluent taken from the river showed an improvement on analysis, although they still did not conform to the accepted standards. Steps are being taken to provide increased purification capacity at the earliest possible opportunity.

The sewage disposal works belonging to Castlereagh Rural District Council at Cregagh are now being demolished and the main sewer to the works has been linked up to the Belfast Corporation's new sewer. This will prevent further discharge of sewage effluent from the works into the Loop river.

A new sewer is at present under construction through the Knock valley; when completed this should remove all risk of pollution by sewage matter from sewer overflows into the Knock River.

Several complaints were received during the year relating to offensive matter in the open portion of High Street River. On tracing the complaint it was discovered that a portion of the river was being contaminated by sewage matter from a defective sewer. Steps were taken by the City Surveyor to re-lay the sewer.

Total number of rivers in City	15
Total number of inspections carried out	144

Hairdressers and Barbers Premises

Routine inspections of these premises were carried out during the year in order to ascertain if the By-Laws made under Section 2 of the Hairdressers Act (Northern Ireland) 1939, relating to cleanliness of premises and equipment, were being observed, in addition to the provision of a sufficient number of wash-hand basins with a supply of hot and cold water laid on with clean towels provided. Where breaches of the By-Laws were discovered, verbal warnings were given by the Sanitary Officer to the person carrying on the business. Subsequent inspections revealed in most cases that the breaches had been remedied and the By-Laws complied with.

Complaints were received regarding offensive odours, especially from ladies' hairdressing establishments. On investigation it was discovered in every case to be due to Ammonium Hydro-Sulphide, a chemical preparation used in the treatment of the hair.

Total number of inspections of registered premises	1,412
Total number of premises on register as at 31st December, 1951	415
Total number of premises registered during 1952	31
Total number of premises deleted from register during 1952	18
Total number of premises on register as at 31st December, 1952	428

Planning and Housing Act (Northern Ireland) 1931

It has been stated in earlier Reports that owing to the serious shortage of dwelling houses, and the pressure of other work, no surveys were made under this Act: these conditions still exist. Representation was made for demolition orders, in the case of two dwelling houses, under Section 29. The dwellings had become so dangerous structurally, and on public health grounds, as to render their demolition an urgent matter.

Report on the Administration of the Factories Acts (Northern Ireland) 1938 and 1949

Factories come within the jurisdiction of the Health Department. Cleanliness, overcrowding, ventilation, heating, the provision of water supplies, washing facilities, drainage of floors, sanitary accommodation, the handling, preparation and storage of food, and many other matters of a hygienic nature call for constant supervision. During the year 2,879 inspections were made, including inspections under the Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) 1948, and Public Health Acts.

Her Majesty's inspector of factories notifies the Local Authority of any matters under their jurisdiction which have come to his notice, and in all 81 such notices were received about insanitary conditions. These all received attention, and the action taken was reported to Her Majesty's Inspector as required by the Act. In 49 factories where sanitary officers discovered that abstract notices, etc., were not exhibited, H.M. Chief Inspector of Factories was notified. Inspections were also carried out under the Public Health Acts and By-Laws, of dance-halls, offices, meeting places, rag and bone dealers, marine stores, workplaces and premises not included under the Factories Acts. It is very gratifying to record that good relations continued to exist throughout the year among Sanitary Officers, factory management and Her Majesty's Inspector of Factories.

It is to be regretted that Inspector Green, a specialist officer engaged on this work, was off duty for ten months during the year owing to illness: this can be regarded as one of the causes of a substantial reduction in the number of inspections recorded as compared with previous years.

PART 1. Inspections for the Purposes of Provisions as to Health carried out by Sanitary Officers:

PREMISES (1)	Number of		
	Inspections (2)	Statutory Written Notices (3)	Occupiers Prosecuted (4)
Factories with mechanical power	2,035	140	9
Factories without mechanical power	316	26	4
*Other premises under the Act (including works of building and engineering construction but not including outworkers' premises)	528	59	—
(*Electrical Stations reckoned as factories)			
TOTAL	2,879	225	13

PART 2. Defects found:

PARTICULARS (1)	Number of Defects			Number of defects in respect of which prosecutions were instituted (5)
	Found (2)	Remedied (3)	Referred to Chief Inspector (4)	
Want of cleanliness (S.1)	17	19	2	4
Overcrowding (S.2)	1	1	1	—
Unreasonable temperature (S.3)	4	4	3	—
Inadequate ventilation (S.4)	4	5	2	—
Ineffective drainage of floors (S.6)	1	1	1	—
Sanitary conveniences (S.7) {	Insufficient	36	20	—
	Unsuitable or defective	330	264	4
	Not separate for sexes	20	10	8
Other offences (excluding offences relating to homework which is included in part 3 of this Report)	14	3	40	1
Breach of special sanitary regulations for Bakehouses (S.56 to S.59)	4	9	—	—
TOTAL	431	336	49	17

Inspections of Factories Carried out under the Public Health Acts

Number of nuisances discovered	225
Number of written notices served	97
Number of nuisances abated	134

PART 3. Homework:

NATURE OF WORK (1)	Number of Inspections of Out- workers' premises (2)	Outwork in Unwholesome Premises (Section 115)			Outwork in Infected Premises (Sections 116 and 117)		
		Instances (3)	Statutory Notices Served (4)	Prosecu- tions (5)	Instances (6)	Orders Made (Sec. 117) (7)	Prosecu- tions (Secs. 116 & 117) (8)
1. Making, cleaning, wash- ing, altering, ornament- ing, finishing and repair- ing of wearing apparel	12	2	2	—	—	—	—
2. Making-up, ornament- ing, finishing and repair- ing of table linen, bed- linen, or other house- hold linen, (including in the term "linen" articles of cotton or cotton and linen mix- tures)	469	3	3	1	—	—	—
3. Textile weaving and any process incidental there- to	1	—	—	—	—	—	—
4. Other	—	—	—	—	—	—	—
TOTAL	482	5	5	1	—	—	—

The total number of outworkers' premises on the register for the six months ended August, 1952 was 310. Sections 114 to 117 Factories Act, 1938, require the keeping of lists of outworkers, *i.e.*, persons who are engaged in any trade or business as defined in Part 3, where work is carried on in their own homes. During the year 482 inspections were made by Sanitary Officers to homes of outworkers to ensure that the provisions of the above sections of the Act and the Public Health Acts were complied with.

Bakehouses

Number of bakehouses on register	312
Total number of inspections made during the year	761

Summary of Defects discovered on Inspection	Reported	Statutory Notices Issued	Remedied
Want of cleanliness	12	5	12
Overcrowding	1	—	1
Unreasonable temperature (ventilation inadequate or not maintained)	7	6	7
Inadequate provisions made for rendering fumes, etc., harmless	3	3	2
Drainage of floors	2	2	2
Drain inlets within the room	11	11	8
Sanitary conveniences communicating directly	2	2	2
Ceilings, walls, floors, windows, doors, etc., requiring cleansing	11	6	8
Ceilings, walls, floors, windows, doors, etc., in disrepair	23	10	16
Preparation or cooking rooms structurally defective	14	12	22
Suitable and sufficient washing facilities not provided	6	6	4
No suitable cloakroom accommodation provided	4	4	1
Other offences	21	20	12
TOTAL	117	87	97

The defects remedied include outstanding defects from the previous year.

In addition to the issue of notices 25 letters were sent to occupiers of bakehouses requesting structural works to be carried out in order to put the premises into compliance with the Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) 1948.

Prosecutions for Offences in Bakehouses

Legal proceedings were instituted against:—

- (a) 3 occupiers for failing to take all reasonable precautions to prevent contamination of food.
- (b) 2 occupiers for having in their possession for the purpose of sale, food which was found to be unsound, unwholesome and unfit for the food of man.

Insanitary Bakehouses

2 bakehouses were found to be in such a state structurally as to be unfit for use or occupation for the preparation of food, and on representation from the department the premises ceased to be used.

Bread Delivery Vans

The inspection with regard to cleanliness of vehicles in which bread is conveyed has been maintained during the year. Where unhygienic methods were discovered, letters of warning were sent to the offenders and their firms. New vehicles show a marked improvement in design from a hygienic point of view. It is to be hoped that some method may be designed which will prevent the exposure of bread and pastry deposited in the vehicle to the dirt and dust of the highway during the period of distribution to shops and dwelling houses.

Report on Office Accommodation inspected during the Year

In the Annual Report for last year reference was made to the fact that existing legislation had been found to be inadequate in several important respects in order to secure environmental conditions which might be considered satisfactory in offices. Nothing has yet been done to improve these unsatisfactory conditions.

Number of office buildings inspected	18
Number of suites of offices inspected	34

Conditions discovered on inspection	Defects	
	Reported	Remedied
Offices dirty	2	2
Passages and stairways dirty	3	5
Offices overcrowded	1	4
Offices inadequately lighted, ventilated or heated	2	7
Offices with unsuitable or no washing facilities	1	5
Offices with unsuitable or no proper drinking water supply	—	2
Offices not kept free from noxious effluvia	4	6
Offices in a damp or defective state	12	16
Sanitary Accommodation:		
Insufficient	1	3
Separate not provided for sexes	1	2
Ventilation or lighting inadequate	13	15
Floors, walls, basins, seats, cisterns, etc., defective or dirty	7	8
Screening, doors, fasteners, etc., defective or not provided	6	3
Absence of intervening ventilated space	—	7
Separate means of approach not provided	—	1
Urinals defective or unsatisfactory	—	1
TOTAL	53	87

The defects remedied include outstanding defects from the previous year. In most cases the action taken above resulted from complaints made. A special survey of office accommodation has been planned, but so far it has been found impossible to execute owing to staff shortage.

Medicines, Pharmacy and Poisons Act (Northern Ireland) 1945

Number of persons on register	28
Number of inspections of premises	34
Number of licences granted during the year	28

The Sanitary Officers are concerned with the investigation of applications for licences, inspection of records, labelling and storage requirements, and sales by persons not holding a licence. It was found necessary to caution three retailers for infringements of the Regulations; on subsequent visits to the premises concerned it was found that the requirements of the Act and Regulations made thereunder were being observed.

Rag Flock Act 1911

Number of premises on register where rag flock is used	61
Number of inspections of premises	78
Number of samples submitted to public analyst	15
Number of samples certified as not being in accordance with the Rag Flock Regulations 1912	5
Number of cautionary letters sent to offenders	1
Number of prosecutions instituted.	3

As recorded in the Annual Report for last year, the Rag Flock Act, 1911 and the Rag Flock (Ireland) Regulations 1912, are out of date and inadequate to deal with present conditions in the upholstery trade. Feathers, hair, fibre, rag cuttings, etc., continue to be used for the filling of bedding, children's toys and upholstery work, for which no standard of cleanliness is provided under existing legislation. In Great Britain the failure of the above Act was recognised and the Rag Flock and Other Filling Materials Act, 1951, was introduced and covers all the above materials. Similar legislation is required in Northern Ireland.

Shops Act (Northern Ireland) 1946

The duties of Sanitary Inspectors appointed under the Act are contained chiefly in Section 22, which relates to the health and welfare of persons employed in shops. In addition inspections are carried out under the Public Health Acts, Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) 1948 and By-Laws. Much of the inspector's time is taken up in supervising structural repairs and alterations, so that premises may be brought into compliance.

During the year a much larger volume of work was carried out than in any previous year since the introduction of the Act in 1946. A special effort was made towards completing the initial survey in order to compile a comprehensive register of shops. It is expected that the survey will be completed by the end of 1954.

Report of the Administration of Section 22 in Connection with the Provisions of the Health and Welfare of Persons Employed in Shops

PART 1

Number of shops on the register	4,359
Number of complete surveys made during the year.....	1,820
Number of inspections made during the year	4,620
Number of contraventions of the Act discovered	1,471
Number of statutory notices served for defects	546
Number of exemption certificates issued with respect to alternative sanitary accommodation	2
Number of exemption certificates issued with respect to alternative washing facilities	1

PART 2.—Defects Found:

Section	Conditions Discovered on Inspections	Defects	
		Reported	Remedied
22 (1)A	Suitable and sufficient ventilation not provided	5	2
"	Suitable and sufficient ventilation not maintained	2	2
22 (1)B	Efficient means for securing a reasonable temperature not provided	13	8
"	Suitable temperature not maintained	6	3
22 (3)	Suitable and sufficient means of lighting not provided or maintained	30	19
22 (4)	Insufficient and unsuitable washing facilities	1,113	614
"	Unsuitable facilities for the taking of meals	4	3
Sanitary Accommodation:			
22 (2)	Insufficient	40	22
"	Separate not provided for the sexes	26	18
"	Ventilation inadequate	20	7
"	Lighting inadequate	41	21
"	Floors, walls, basins, seats, cisterns, etc., defective or dirty	84	61
"	Screenings, doors, fasteners, etc., defective or not provided	56	40
"	Absence of an intervening ventilated space	28	18
"	Separate means of approach	14	12
TOTAL		1,482	850

Report on Inspection of Shops under the Public Health Acts

Number of public health nuisances discovered	427
Number of statutory notices served	204
Number of nuisances abated on receipt of notice	290

Sale of Food and Drugs Acts

Report on the administration of the Food and Drugs Acts 1875 to 1899 in relation to sampling so as to check the nature, substance, and quality of food sold within the City.

Year	Number of Samples taken for Analysis			Number of Samples Adulterated			Percentage of Samples Adulterated		
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
1948	956	59	1,015	40	2	42	4·18	3·38	4·13
1949	972	57	1,029	34	—	34	3·49	—	3·30
1950	1,012	15	1,027	21	—	21	2·07	—	2·04
1951	1,026	19	1,045	14	—	14	1·36	—	1·34
1952	1,048	15	1,065	22	1	23	2·06	6·66	2·16

Samples Analysed During the Year

The samples detailed in the table below were collected in the following manner:—

Formal Samples—1,052

Informal Samples—13

ARTICLE	Number Examined	ARTICLE	Number Examined
Almonds, ground	1	Magnesia, carbonate of	3
Apples, cooked with sugar	1	Margarine	20
Apples, raw with sugar	1	Marshmallow cream	1
Apple juice	1	Mayonnaise	6
Arrowroot	1	Meat paste	5
Barley	6	Milk, condensed	6
Beef, minced	23	Milk, skimmed	1
Beef, stewed steak and gravy	3	Milk shake	1
Beverage	1	Mincemeat, sweet	1
Brandy	8	Mineral waters	7
Breadcrumbs, golden	1	Milo, food drink	2
Butter	16	Mustard	20
Butterdrops	4	Oil, cod liver	2
Buttermilk	19	Oil, olive	8
Butterscotch	1	Paraffin, liquid	11
Cheese	3	Peas, dried	5
Cheese, spread	1	Peas, green	2
Cherries, glaze	3	Peel, mixed cut	3
Chocolate, drinking	6	Pepper, flavoured compound	1
Chocolate, hot	1	Pepper, ground white	9
Chocolate, with sugar	1	Pickles	2
Chutney, green tomato	1	Piccaililli	2
Cinnamon	2	Peroxide of Hydrogen	1
Cocoa	12	Powder, baking	13
Coconut, dessicated	6	Powder, curry	4
Coffee and Chicory Essence	16	Powder, custard	17
Coffee, french	1	Powder, dessert	1
Condiment, non-brewed	11	Powder, golden raising	1
Cornflour	9	Powder, seidlitz	2
Cream, full condensed	1	Rice	6
Cream, synthetic	2	Rice, ground	2
Cream of Tartar	10	Sage	1
Crystals, foam	1	Salt	1
Curd	8	Salad cream	7
Cider, non-alcoholic	1	Sandwiches, chicken	1
Doughnut mix	1	Sauce	7
Dripping	1	Sauce, mint	1
Farola	4	Sausages	69
Fat, cooking	5	Sausage, luncheon	2
Fat extender compound	2	Sausage meat	23
Fish dressing	1	Sausage meat roll	2
Fish paste	3	Sausage meat roll with vegetables	2
Fish spread	2	Semolina	2
Flour, self-raising	10	Soda, bicarbonate	17
Frankfurters	1	Soft drinks	18
Fruit, dried	16	Soup, cream of tomato	1
Fruit, wine, non-alcoholic	1	Soup, mixture	3
Gelatine	3	Spice, ground and mixed	5
Gin	9	Sponge, mixture	1
Ginger	2	Spread, honey flavoured	2
Ginger, ground	3	Suet, shredded beef	10
Ice-cream	71	Sweetmilk	235
Isinglass and gelatine	1	Sweetmilk, dried	1
Jam	23	Tablets, tea saving	2
Jelly crystals	32	Tapioca	3
Jelly, glucose and caramel	1	Tea	23
Jelly, mint	1	Tomatoes	1
Jelly, table	12	Vegetables, dehydrated	2
Ketchup, mushroom	2	Vinegar, malt	19
Ketchup, tomato	5	Whiskey	23
Lard	7	Yoghourt	1
Lentils	4	Yorkshire relish	6
Loaf, plain	1		

Legal Proceedings in Respect of Adulterated Foods

NATURE OF SAMPLE	Total No. of Samples Taken	Adulter- ations	Prosecu- tions	Convic- tions	Fines
Beef, minced.....	23	7	7	7	£6 10 0
Butterdrops	4	2	1	Warranty pleaded	Case with-drawn
Buttermilk	19	5	5	3	£3 10 0
Gin	9	1	1	1	£2 0 0
Ice-cream	71	2	1	1	P.O.A.
Sausage meat	23	3	3	3	£7 0 0
Sweetmilk	235	1	—	—	—
Whiskey	23	1	1	1	£5 0 0

Cases of adulteration in which no legal proceedings were instituted but owners were cautioned:—
Butterdrops 1; ice-cream 1; sweetmilk 1.

Milk Control

The purity of milk is very essential and depends on several elements. First of all the cows that produce the milk must be free from disease. The basis of this must be the elimination from all milking herds of every cow which shows evidence of any disease which is likely to affect the milk injuriously.

Statutory Rules and Orders of Northern Ireland, 1951 No. 189 states that “ where an animal shows evidence of any disease which is likely to affect the milk injuriously, it shall be segregated from the rest of the herd or removed from the herd as the case may require, and while segregated or removed its milk must not be sold; further, where an animal is certified as reacting to the tuberculin test, it shall forthwith be removed from the herd and a record shall be kept as to the manner in which the animal has been disposed of.”

Licences for the production, pasteurising and distributing of milk are issued by the Ministry of Agriculture, Northern Ireland.

Since 31st August, 1952 only Grade A (T.T.) and pasteurised milk are on sale in Belfast. The Regulations provide that cowsheds shall be kept in good condition; they also deal with the lighting, ventilation, water supply, floors and walls, and give direction as to the cleanliness of the persons engaged in milking the cows, the need for grooming the cow, the washing and drying of the udders before milking, the cooling and bottling of the milk, the cleansing and sterilising of milk utensils, milk churns and vehicles. The same Regulations also control the conditions under which the dairy-men deal with the milk, and the prevention of contamination of same. The regulations go far to ensure that milk is produced and distributed free of contamination from dirt.

On an average, 45,000 gallons of milk are pasteurised daily at six dairies within the Borough, either by the Holder method, where the milk is retained at a temperature of not less than 145° F. and not more than 150° F. for at least 30 minutes and then cooled immediately to a temperature of not more than 45° F., or by High Temperature Short Time method where the milk is retained at a temperature of not less than 161·5° F. for at least 15 seconds and then cooled immediately to a temperature of not more than 45° F.

Grade A. (T.T.) milk must not contain more than 50,000 bacteria per millilitre and no coliform organisms in one-hundredth part of a millilitre. Pasteurised milk should not contain coliform organisms in one millilitre, and should give a reading of not more than 2·3 Lovibond blue units when submitted to a phosphatase test.

Number of Licensed Producers of milk in City	7
Average number of cows on licensed Producers premises	161
Number of wholesale distributors of milk	35
Number of retailers distributing pasteurised milk	1,140
Number of retailers distributing Grade A. (T.T.) Milk	32
Number of inspections of dairies, cowsheds and milkshops	1,441
Number of samples of milk taken under the Sale of Food and Drugs Acts	235
Number of breaches found in dairies and milkshops	4

Particulars of Sweetmilk samples Taken During Five Years, 1948 – 1952

Year	Number of Samples Taken	Number of Samples Adulterated	Percentage of Samples Adulterated
1948	353	15	4.24
1949	294	11	3.74
1950	307	4	1.3
1951	202	—	—
1952	235	1	0.42

Particulars of Bacteriological Examination of Milk

TEST	Grade of Milk	Number of Samples Examined	RESULT OF TEST			
			Satisfactory		Unsatisfactory	
			Number	Percentage	Number	Percentage
Plate Count	A	35	31	88.57	4	11.42
“ “	B	12	12	100.	—	—
“ “	B. Pasturised	134	133	99.25	1	0.74
“ “	Pasteurised	73	73	100.	—	—
Coliform	A	35	32	91.42	3	8.57
“	B	12	10	83.33	2	16.66
“	B. pasteurised	134	125	93.28	9	6.71
“	Pasteurised	73	72	98.63	1	1.36
Phosphatase	B. pasteurised	134	134	100.	—	—
“	Pasteurised	73	73	100.	—	—
Biological	A	129	129	100.	—	—
“	B	24	24	100.	—	—

A total of 254 samples of sweetmilk were collected by Food and Drugs Inspectors and forwarded to the Bacteriologist at the Public Health Laboratory, for bacteriological and coliform organisms test. 207 samples of Grade B. pasteurised and pasteurised milk were tested for phosphatase reaction. Where the Bacteriologist reported unsatisfactory results of tests in connection with the above samples, cautionary letters were sent to the distributors concerned and the Ministry of Agriculture notified accordingly. 153 samples of Grade A. and Grade B. milk were collected and forwarded to the Pathological Laboratory, Purdysburn, for biological examination.

During the year 40 samples of mineral water were submitted for bacteriological examination; of these, 2 samples were found to be unsatisfactory because of the very high viable count at 37° C. and 22° C., suggesting contamination at the bottling stage. A detailed inspection carried out at the works by one of the food inspectors revealed the source of contamination which was subsequently remedied. Further samples taken from the same works proved to be satisfactory.

Registration of Margarine Factories and Wholesale Dealers

A. Margarine Factories on register	—
B. Wholesale dealers in margarine on register	79

Public Health Acts 1878 and 1890

The following unsound foodstuffs were surrendered after being condemned by Food and Drugs Inspectors of the Department and were destroyed or disposed of otherwise than for the food of man, under supervision. The term “surrendered” includes cases in which inspectors have discovered unwholesome food in the course of their duty, but in which, owing to the traders’ acceptance of the inspectors’ decisions, it was not necessary to obtain a magistrate’s order prior to destruction.

Articles	Tins, Jars, Packets, Bottles	Articles	Tins, Jars, Packets, Bottles
Apple Puree	3	Marzipan	576
Asparagus	3	Meat	2,729
Baby Food	288	Meat pies	36
Baking Powder	12	Milk	983
Beans	1,653	Mincemeat	85
Beef Suet	11	Miscellaneous	47
Beverages	14	Mushroom Ketchup	4
Bicarbonate of Soda	1	Mustard	10
Bournvita	20	Nut Kernels	14,796
Bread (loaves)	49	OxO Cubes	530
Briskies	26	Paste	559
Cake Flour	18	Peas	5,751
Cake Mixture	18	Pickles	65
Cheese	9,704	Puddings	71
Cheese Spread	498	Rabbit	3
Chicken	11	Salad Cream	1,558
Chocolate Bars	91	Salad Dressing	11
Cochineal	4	Salt	8
Cocoa	135	Sandwich Spread	1,943
Cockles	4	Sauce	50
Coconut	213	Sausages	3
Coffee	9	Savoury Ducks	72
Corn	9	Semolina	135
Cornflakes	48	Shredded Wheat	15
Curry	4	Soup and Broth	3,458
Custard Flavouring	4	Spaghetti	207
Custard Powder	46	Sponge Mixture	13
Dates	1,870	Strawberry Puree	4
Dessert Mixture	84	Suet	10
Drinking Chocolate	25	Syrup	12
Fish	1,901	Tomatoes	655
French Capers	11	Tomato Chutney	2
Fruit	22,123	Tomato Ketchup	942
Fruit Juice	2,176	Tomato Puree	7
Fruit salad	41	Treacle	5
Fruit Salts	11	Vegetables	1,286
Ham	86	Vegetable Salad	4
Honey	3	Vegetable Spread	6
Irish Stew	2	Vegetable Stuffing	6
Jam	1,002	Wafers (ice)	2
Jellies	1,765	Weetabix	9
Lucozade	1	Whipping compound	194
Macaroni	57	Whipping Cream	2
Marmalade	233	Wonder Orange Squash	12
Mayonnaise	1,698	Chutney	2 galls.
Horse Radish	1	Liquid Eggs	12
Mint Sauce	2	Onions	3/4 case
Tomato Juice	$\frac{1}{2}$		

Articles	Tons	Cwts.	Qrs.	Lbs.
Apricot Pulp	—	—	—	12
Bacon	—	—	1	6
Baking Powder	—	—	—	4
Barley	1	13	1	26
Beans	—	1	—	—
Beetroot	—	1	1	11½
Biscuits	—	—	—	14½
Black and White Pudding	—	—	1	5
Butter	—	1	—	½
Cabbage	—	—	2	14
Caramels	—	—	—	3
Carrots	—	3	1	14¾
Cheese	—	3	—	7¾
Chocolate	—	—	—	16¾
Cloves (ground)	—	—	—	1
Confectionery	—	—	2	11
Cooked Ham	1	7	3	17¾
Cooking Fat	—	—	1	14
Cornflour	—	2	—	7
Currants	—	—	2	—
Curry Powder	—	—	—	12
Custard Powder	—	—	1	24
Dessert Powder	—	—	—	4
Dried Mint	—	—	—	1
Flake Meal	—	—	3	7
Flour	—	—	—	2
Flour (self-raising)	1	5	—	—
Fish (wet)	—	—	—	13½
Fruit (dried)	—	—	1	19¼
Fruit (fresh)	—	—	2	10¼
Fruit Cake	—	—	—	27
Gelatine	—	—	—	12
Ginger (preserved)	—	—	—	1
Ginger Nuts	—	—	—	2
Jam	—	—	—	26
Jelly Crystals	—	—	—	14
Lentils	—	2	2	2
Margarine	—	1	3	1½
Marshmallow Cakes	—	—	—	2
Miscellaneous	1	16	—	—
Mixed Spice	—	—	—	1
Mustard	—	—	—	4
Nutmeg	—	—	—	½
Peas	—	—	2	21
Pepper	—	—	—	1
Pineapple Syrup	—	—	—	12
Potatoes	—	—	2	—
Pressed Beef	—	—	—	21
Raisins	—	1	—	4
Rice	—	—	2	—
Rice (ground)	—	—	—	14
Roast Beef Dripping	—	—	1	12
Sage	—	—	—	4
Salt	—	—	2	—
Sausages	—	—	1	14½
Semolina	—	—	3	17½
Shortcake	—	—	—	10½
Soup	—	—	2	9¼
Spaghetti	—	—	3	19½
Sugar	—	2	1	—
Tapioca	—	—	—	17
Tea	—	—	1	26

Articles	Tons	Cwts.	Qrs.	Lbs.
Tinned Meat	1	3	3	8 $\frac{3}{4}$
Tinned Veal	—	4	2	24
Toffee	—	—	—	4
Tomatoes	—	2	1	8
Tomato Paste	—	2	2	16
Treacle	—	—	—	6
Uncured Pork Gut	—	1	—	—
Vanilla Wafers	—	—	—	16
Whipping Cream	—	—	—	3 $\frac{1}{2}$
Yeast	—	3	—	—

During the year 572 certificates were issued in connection with the above foodstuffs.

The following table shows the amount of foodstuffs seized by the Food and Drugs Inspectors as being unsound, unwholesome and unfit for the food of man, and taken before a resident magistrate who granted a condemnation order for the destruction of same. Details of legal proceedings arising therefrom will be found under the heading "Analysis of Legal Proceedings."

Articles	Tins, Jars or Packets	Articles	Tins, Jars or Packets
Beans	2	Macaroni	12
Bournvita	20	Peas	44
Carrots	2	Pickled Onions	2
Cherries	30	Potato Crisps	5
Cocoa	135	Quartered Apples	7
Chocolate Bars	91	Sage and Onion Stuffing	4
Condensed Milk	8	Salad Cream	13
Crushed Pineapple	1	Sausages (pork)	2
Date Pudding	5	Semolina	48
Fruit Salts	11	Sliced Beetroot	2
Hams (cooked)	15	Soup	197
Ice Cream	1	Spaghetti	151
Jelly Crystals	30	Veal and Ham Loaf	1
Jelly, Table	152		

Poultry — 35

Meat Pies — 8

Onions — $\frac{3}{4}$ of a case

Articles	Cwts.	Qrs.	Lbs.	Articles	Cwts.	Qrs.	Lbs.
Barley	—	—	7	Peas	—	—	20
Beans	1	—	—	Raisins	—	1	2
Biscuits	—	—	21 $\frac{1}{2}$	Rice	3	2	14
Brazil Nuts	—	—	3 $\frac{3}{4}$	Rock Chocolate	—	—	2
Caramels	—	—	3	Shortcake	—	—	10 $\frac{1}{2}$
Corn Flour	1	—	—	Sugar	—	3	—
Currants	—	—	5	Sultanas	—	—	10
Ham	—	—	9 $\frac{1}{2}$	Tapioca	—	—	7
Lentils	1	—	5	Tea	—	—	9
Margarine	1	—	14	Toffee	—	—	1 $\frac{1}{4}$
Onions	—	—	20				

Sale of Ice Cream Acts (Northern Ireland) 1937 and 1950

PREMISES	Manufacture	Manufacture and Sale	Sale Only	Total
Total number of premises on register at 31st December, 1951	6	153	545	704
Total number of deletions of premises from register during 1952	1	40	109	150
Total number of premises registered during 1952	2	6	159	167
Total number of premises on register at 31st December, 1952	7	119	595	721

Number of inspections of registered premises during the year	2,156
Number of summonses issued for breaches of the Acts, By-Laws, Regulations and Orders	41
Number of samples submitted during the year for bacteriological examination	431
Number of samples submitted during the year for chemical analysis	71

The Minister of Food made certain standards for ice cream manufactured for sale. The Order is known as The Food Standards (Ice Cream) Order 1951, and provides that ordinary ice-cream shall contain at least 5 per cent of fat, $7\frac{1}{2}$ per cent of milk solids other than fat, and 10 per cent of sugar, of which not less than $7\frac{1}{2}$ per cent must be sucrose. Special standards are prescribed for ice cream containing fruits and for Kosher ices. The above Order was amended by The Food Standards (Ice Cream) (Amendment) Order, 1952, which reduces the amount of fat and solids which should be present in ice-cream offered for sale. The Order provides that ice-cream shall contain not less than 4 per cent fat, 10 per cent sugar and 5 per cent milk solids other than fat. (Special standards are still retained for ice-cream containing fruit and for Kosher ices).

In view of the enormous quantity of ice-cream now being consumed by the population and the improvement in the supply of fats and milk powder, consideration should be given to increasing its food value by the revocation of the above Amendment Order. The following table sets out the application of these standards to the 71 samples which were submitted for chemical analysis during the year.

Number of Samples	In Compliance with Prescribed Standards		Not in Compliance with Prescribed Standards			
	Number	Percentage	Fat		Total Solids	
			Number	Percentage	Number	Percentage
71	69	97·18	2	2·82	—	—

Action was taken in regard to the samples which did not comply with the prescribed standards.

Particulars of Bacteriological Examinations

Plate Count 431 samples

Organisms per Millilitre	Number of Samples	Percentage of Total Samples
200,000 or under	384	89·09
Over 200,000 and under 500,000	11	2·55
Over 500,000 and under 1,000,000	12	2·78
Over 1,000,000	24	5·57

Coliform Test 431 samples

Coliform Organisms	Number of Samples	Percentage of Total Samples
Absent in 1 millilitre	355	82·37
Present in 1 millilitre	12	2·78
Present in 1/10 millilitre	15	3·48
Present in 1/100 millilitre	17	3·94
Present in 1/1,000 millilitre	32	7·42

During the year 57 cautionary letters were sent to vendors whose ice-cream did not comply with the bacteriological standard as prescribed by regulation S.R. & O. 1945 No. 71, made by the Ministry of Agriculture for Northern Ireland under Section 10 of the Sale of Ice Cream Act (Northern Ireland), 1937.

The following table gives a summary of the inspections made during the year of food shops, stores, etc., by food and drugs inspectors:—

Description of Shops, etc.:	Number of Visits
Butchers Shops	1,907
Chemists Shops	2
Cold Stores	4
Confectionery Shops	2,305
Fish Shops	376
Fish and Chip Shops	2,050
Food manufacturers	79
Fruiterers	2,322
Grocers Shops	4,954
Hawkers Carts	502
Ice-Cream Shops	2,156
Markets	87
Meat Factories	75
Milk Shops	1,651
Mineral Water Factories	18
Poultry Shops	161
Provision Shops	2,562
Public Houses	61
Restaurants	1,140
Wholesale Stores	497

The Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) 1948

The following table gives a summary of defects discovered in food premises (other than butchers, ice-cream and fish and chip premises which are reported elsewhere):—

Breaches of Regulations	DEFECTS		
	Reported	Remedied	In Progress
No proper preparation room	7	7	—
Walls, ceilings, floors, doors, etc., in disrepair	32	33	5
Walls, ceilings, doors, windows, etc., requiring cleansing and re-decoration	11	16	—
Light and ventilation not provided or insufficient	19	13	2
Sanitary accommodation not provided or insufficient	10	11	3
Sink, hot and cold water not provided or insufficient	61	62	6
Drain inlets within the food room	12	11	2
Cooking ranges not provided with means for removal of fumes or inaccessible for cleansing	10	8	—
Failure to prevent risk of contamination of food	12	15	2
TOTAL	174	176	20

The defects remedied include outstanding defects from the previous year.

Registration of Butchers' Shops Belfast Corporation Act (Northern Ireland) 1930 Section 43

Total number of premises on register as at 31st December, 1951	383
Total number of premises registered during 1952	25
Total number of premises deleted from register during 1952	21
Total number of premises on register at 31st December, 1952	387
Total number of inspections of registered premises during 1952	1,907

Breaches of the Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) Discovered by Food and Drugs Inspectors During 1952

Conditions discovered on inspection of Butchers' Shops	DEFECTS		
	Reported	Remedied	In Progress
No proper preparation room	25	7	3
Walls, ceilings, floors, doors, etc., in disrepair	131	54	18
Walls, ceilings, doors, windows, etc., requiring cleansing and re-decoration	15	4	6
Light and ventilation not provided or insufficient	71	19	10
Sink, hot and cold water not provided or insufficient	58	24	6
Sanitary accommodation not in compliance or not provided	9	5	2
Drain inlets within the food room	3	1	2
Failure to prevent risk of contamination of food	21	11	2
Complete re-construction of premises	2	2	—
TOTAL	325	127	49

The Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland) 1948, deal with the conditions in rooms where food intended for human consumption is prepared for sale, or sold, or offered or exposed for sale, or deposited for the purpose of sale, or of preparation for sale. Their purpose is to secure that the physical state of the room and equipment and the behaviour of the persons in it are, so far as practicable, such that the danger of contamination is minimised. It lays down conditions for the cleansing and repair of walls, ceilings, windows, doors, etc., the removal of refuse and the position of refuse bins, water closets, cisterns, washhand basins, and the means of ventilation. The use of the room for living or sleeping purposes is prohibited. The persons employed in the room must keep their person and clothing, as well as the room and the equipment clean. A sufficient number of washhand basins, with a supply of hot and cold water laid on, soap and clean towels must be provided and maintained in good condition.

**Registration of Premises used for the Business of a Vendor of Fried Fish
or Fried Potatoes**

Belfast Corporation (General Powers) Act (Northern Ireland) 1948, Section 25

Total number of premises on register as at 31st December, 1951	.....	140
Total number of premises registered during 1952	.....	47
Total number of premises deleted from register during 1952	.....	9
Total number of premises not in compliance with By-Laws and refused registration during 1952	.....	13
Total number of premises on register at 31st December, 1952	.....	178
Total number of summonses issued for using unregistered premises during 1952	.....	4
Total number of inspections of premises during 1952	.....	2,050

Breaches of By-Laws discovered on premises used for the business of fried fish or fried potatoes	DEFECTS		
	Reported	Remedied	In Progress
No preparation room and/or no potato store	13	38	1
Ceilings, walls, floors, doors, etc., in disrepair	14	39	—
Ceilings, walls, doors, windows, etc., requiring cleansing and re-decoration	3	18	—
Sink, hot and cold water not provided or insufficient	3	15	—
Sanitary accommodation not provided or insufficient	1	8	—
Lighting, or ventilation not provided or insufficient	13	33	—
Drain inlets within the food room	3	6	—
Unsuitable cooking ranges and no provision to collect gases and vapours	5	17	—
No provision to prevent solid matter entering the drain	7	19	—
Fixtures and fittings in a state of disrepair	3	7	—
Failure to prevent risk of contamination of food	9	19	—
Use of unsuitable paper wrappings	2	2	—
TOTAL	76	221	1

The defects remedied include outstanding defects from previous year. The owner or occupier of any premises within the City used or proposed to be used for the business of a vendor of fried fish or fried potatoes who desires to have such premises registered in accordance with the provisions of the above Act, shall make application in writing to the Corporation. The Corporation may on certain grounds (as set out in Statutory Rules and Orders (Northern Ireland) 1950 No. 102) refuse to register the premises, or they may cancel the registration of any premises on any grounds which would entitle them to refuse registration of those premises.

PESTS CONTROL SECTION.

Rodent Control

Satisfactory progress was maintained throughout the year in this section. Attention is directed to the number of recorded infestations, 527, of which 373 were rat infestations, or approximately 10 per cent of the total surveys: this is a higher percentage than for 1951. The increase in the number of infestations is not due to any greater degree of rat activity within the sewer treated areas. The activity of rats outside these treated areas has resulted in consideration having been given, in consultation with the City Surveyor's Department, to extending "sewer treatment" so that an expansion of the "Block Control" principle may be made to cover a greater area of the City. Due to a revision of the baiting system, together with the use of new rodenticides and appointment of an additional Pests Officer, the number of campaigns carried out amounted to 215 as against 145 during the year 1951. In addition 24 campaigns were carried out in 18 schools and meals kitchens against rats and mice. Test baiting of premises was introduced as a means of checking the effectiveness of the action taken by the occupier.

The advantage of the revision of "sewer treatment" is revealed by the number of campaigns carried out, 103 as against 47 during the year 1951, without any increase in manpower. Although the number of sewer manholes baited was less than in 1951, the percentage of poison baits taken was greater. This was due to more methodical systematic baiting which dispensed with unnecessary manhole baiting.

The movements of rats are not fully understood; there is evidence that small movements within a limited area may be a daily occurrence, but movements over a wider area, giving rise to possible infestations some distance from the parent one, are comparatively rare. It has been found that the most effective method of establishing satisfactory control is by the clearance of rats from a sufficiently wide and defined area to prevent immediate re-infestation. This method is known as the "Block Control" principle. To produce the greatest possible degree of success it should be linked with the treatment of the sewers. Hence the importance of sewer treatment.

The continued co-operation of the City Surveyor in this important function of rodent control is acknowledged with much satisfaction.

Number of surveys on lands and premises	.....	.....	.....	.....	3,856	
Number of re-visits and re-inspections	.....	.....	.....	.....	4,271	
TOTAL					8,127	
Number of lands, premises, etc., found infested	.....	.....	.....	.....	527	
1. Rat infestation	.....	.....	.....	.....	373	
(a) Food premises	.....	.....	.....	.....	101	
(b) Non-food premises	.....	.....	.....	.....	272	
2. Mouse infestation	.....	.....	.....	.....	154	
(a) Food premises	.....	.....	.....	.....	38	
(b) Non-food premises	.....	.....	.....	.....	116	
Premises treated by Pests Officers	.....	.....	.....	.....	91	
Number of poison campaigns carried out by Pests Officers on request of the occupier who undertook to pay costs	.....	.....	.....	.....	215	
1. For rats	206.	2. For mice	9.			
School buildings and meals kitchens treated at the request of Director of Education	.....	.....	.....	.....	18	
Poison campaigns carried out in school buildings and meals kitchens						24

1. For rats	14.	2. For mice	10.	
Number of premises wherein the occupier undertook to eliminate rats or mice on statutory or verbal notices under the Act				418
1. Action taken by rat destruction firms				67
(a) For rats	43.	(b) For mice	24.	
2. Action taken by occupiers				351
(a) For rats	237.	(b) For mice	114.	
Premises test-baited				23
Number of premises where rat-proofing and other works were carried out to prevent infestation				47
Number of notices served under the Rats and Mice (Destruction) Act, 1919				16
Number of Summonses served under the Rats and Mice (Destruction) Act, 1919				2
Action taken by District Sanitary Officers re rat complaints:				
Number of premises where drains were tested				281
Number of premises where drains were defective on test				154
Rat Destruction campaigns carried out in sewerage system in co-operation with the City Surveyor's Department				103
Total number of manholes treated in sewer areas				1,763
Total number of baits laid in manholes				9,721
Total number of baits taken by rats				5,383
Total number of poison baits laid in manholes				2,707
Total number of poison baits taken by rats				2,397

Mosquito Control

From 7th April to 18th October labourers were employed for Mosquito Control under the supervision of the Pests Control Officer. The method employed was similar to that of previous years: preliminary surveys of potential breeding areas were made by the Pests Control Officer and the spraying of places, where actual breeding was found, was carried out by three labourers using knapsack sprayers. To remain effective, the oil application required to be repeated every two weeks. The normal procedure was carried out until it was definitely ascertained that the quantity of waste transformer and turbine oil which would be available for the season would not be sufficient to meet requirements. In the light of this, a review of the oil position resulted in a reduction in the number of labourers from three to two and the introduction of D.D.T. in the waste oil on the areas treated. A 32 per cent D.D.T. solution was obtained to form, when mixed with waste oil, a 1 per cent D.D.T. solution. The work of the mosquito control squad was somewhat handicapped by the conditions which prevailed following the excessive rainfall in August; nevertheless the treating of the areas, especially the Bog Meadows, was done as satisfactorily as possible. Complete control of the Bog Meadows is still an impossibility, but it is considered that the use of D.D.T. solution was effective as no complaint was received from the surrounding district. The Bog Meadows, as previously reported is recognised to be a drainage problem, and will remain the Department's biggest problem in mosquito control. In addition to the Bog Meadows treatment against mosquito larvae and pupae was systematically carried out in the following areas, where stagnant or static water was found to contain larvae:—Annadale Embankment; Bladon Drive; Deramore Park; Duncrue Street; Greencastle; Holywood Road; Lennoxvale (Malone Road); Musgrave Park; Newforge; Orangefield; Stranmillis Road and Royal Belfast Academical Institution (Osborne Park). Water containers in which mosquito larvae existed were periodically treated during the season with a 5 per cent D.D.T. solution at the following garden plots:—Adelaide; Annadale Embankment; Bladon Drive; Beersbridge Road; Cairnburn Road; Channing Street; Gibson Park; Donegall Road; St. James' Road; Sharman Road; Stranmillis Road; Sydenham; "Holyrood," Malone Road; Westland Road; and North

Road. Spraying was also carried out as a precautionary measure to stagnant water on ground adjoining Shore Road. *Aedes Detritus* were found at Duncrue Street, Greencastle and Holywood Road; *Anopheles Claviger* were found at Bladon Drive, Bog Meadows, Deramore Park and Musgrave Park; *Theobaldia Annulata* were found at Bog Meadows, Holywood Road, Orangefield and Stranmillis Road; *Culex Pipiens* were found in all areas where mosquito larvae were discovered. In general mosquito control was very well maintained throughout the season, but it is thought that the effect of the control work carried out was somewhat nullified by the apparent inaction of the local authorities adjoining the City Boundary, and by the owners of gardens permitting water to remain in containers, etc., without adequate protection against the mosquito. The persistent mosquito breeding is considered to be partly due to these contributing factors.

After the flooding which occurred in the Bog Meadows and Crumlin Road areas during August, the Pests Control staff was engaged for a short period in distributing disinfectant fluid and cleaning premises which had been flooded.

During the seasonal period the following materials were used:—

Waste transformer oil	.....	.....	.....	.....	5,320 gallons
32 per cent D.D.T. solution	.....	.....	.....	.....	49 gallons
5 per cent D.D.T. solution	.....	.....	.....	.....	5 gallons
Disinfectant	.....	.....	.....	.....	200 gallons
Miles covered by Motor van	.....	.....	.....	.....	1,257
Petrol used by motor van	.....	.....	.....	.....	105 $\frac{3}{4}$ gallons

339 surveys were made during the season.

Insects other than Mosquitoes

The use of D.D.T. and Gammexane for the eradication of insect pests was continued during the year. During the summer months there were numerous complaints from tenants on a new housing estate regarding flea infestation. Various theories were advanced as to the possible cause. The established causes are (1) want of cleanliness, and (2) animals. It was obvious that the plague of fleas was due to either or both of these causes. Infested premises should be treated before tenants are allowed to move to new housing estates.

Numerous complaints were received from occupants of prefabricated bungalows in various districts of infestations of earwigs. It is likely the problem will continue from year to year due to the situation and structural nature of the buildings which provide excellent cover for the insects during daylight.

Advice was given and treatment carried out in a few instances at request of the occupier where premises were infested with cockroaches and steam flies. Advice was given to occupiers of bug-infested dwelling houses, and in special circumstances such as extreme poverty, lack of intelligence or infirmity, treatment was carried out by Pest Officers. Many occupiers take measures against bugs but their efforts do not meet with much success largely because their actions are not co-ordinated, and because of the structural nature of old property. Satisfactory treatment of old infested dwelling houses could only be achieved on the principle of "Block Control."

Number of visits to premises for ascertaining infestation	.....	.....	176	
Number of revisits to premises	.....	.....	105	
Number of premises found to be infested	.....	.....	108	
(a) Fleas	.....	19	(b) Cockroaches	44
(c) Bugs		19	(d) Beetles	2
(e) Other insects		24		

Total number of premises treated				56
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Analysis of Legal Proceedings

Proceedings	Offence	Summonses	Orders	Fines
Belfast Corporation Act 1930	Failed to provide ashbin	15	—	£1 0 0
Belfast Corporation (General Powers) Act, 1948	Sold fish and chips in unregistered premises	4	—	2 10 0
Factories Acts (Northern Ireland) 1938 and 1949	Contravention of	8	—	2 0 0
Food Standards (General Provisions) Order 1944, etc.	Sold food below prescribed standards	1	—	P.O.A.
Merchandise Marks Acts	Exposed for sale imported fresh apples not bearing an indication of origin	1	—	0 10 0
" " "	Exposed for sale imported raw tomatoes not bearing an indication of origin	10	—	4 15 0
Public Health Acts 1878 to 1907	Abatement of nuisances	2,620	235	54 8 6
" " " " " "	Waterclosets not supplied with sufficient water for flushing purposes	83	—	6 17 6
" " " " " "	Disobedience of Magistrates Orders	44	—	129 1 8
Public Health (Preservatives, etc., in Food) Regulations (Northern Ireland), 1927	Prohibited preservatives in food	8	—	9 0 0
Public Health (Prevention of Contamination of Food) Regulations (Northern Ireland), 1948	Preparation and storage of food in a room used as a living or sleep-place	2	—	1 0 0
" " "	Failed to take all reasonable precautions to prevent contamination of food	10	—	7 5 0
" " "	Preparation and storage of food in a room in direct communication with a sanitary convenience	1	—	0 10 0
" " "	Failed to observe due cleanliness of premises	5	—	12 0 0
" " "	Failed to observe due cleanliness of person	4	—	3 0 0
" " "	Failed to provide and maintain washing facilities	3	—	1 0 0
" " "	Failed to take all reasonable precautions to prevent contamination by animals and dirt	3	—	1 5 0
Public Health (Ireland) Act 1878 and Public Health Act (Amendment) Act 1890	Sold food unfit for the food of man which was seized and destroyed by order of resident magistrate	12	—	41 0 0
Public Health (Ireland) Act 1878 and Public Health Act 1896	Obstruction of an Order	1	—	2 0 0
Rag Flock Act 1911 and Rag Flock Regulations 1912	Samples of Rag Flock failed to comply with standard of cleanliness	3	—	12 0 0
Rats and Mice Destruction Act 1919	Failed to take steps to destroy rats	2	—	2 0 0
Regulation of Piggeries 1894	Contravention of By-Laws	6	—	0 15 0

Analysis of Legal Proceedings—continued.

Proceedings	Offence	Summonses	Orders	Fines
Sale of Food and Drugs Acts 1875 to 1899	Adulteration of foodstuffs	8	—	8 10 0
Sale of Ice Cream Acts (Northern Ireland) 1937 and 1950	Sold ice-cream in unregistered premises	1	—	0 10 0
" " "	Sold ice-cream which failed to comply with the prescribed standard as to the absence of coliform organisms	18	—	34 10 0
" " "	Sold ice-cream which failed to comply with the prescribed standard as to the bacteriological count	12	—	14 0 0

The number of pupil sanitary officers engaged in practical training in the Health Department during the year was six, of whom four will complete their training for the Royal Sanitary Institute (outside England and Wales) Examination in May, 1953. Only two of these candidates will have attained the eligible age to sit for the examination which will be held in Belfast from 4th to 6th June, 1953. It is hoped that the other two candidates will pursue their studies and present themselves for the examination on attaining the age set out in the examination regulations. The remaining two candidates will continue practical training until May, 1955; this will qualify them to sit for the examination held by The Royal Sanitary Institute and Sanitary Inspectors Examination Joint Board. It is unfortunate that a pupil cannot qualify under the present arrangements to enter for the above examination in less than four years, and a difficult period lies ahead unless the Working Party at present studying the whole question of recruitment, training and qualifications of sanitary inspectors is able to produce a positive policy and programme.

The loss to the Department of so many experienced inspectors in the four preceding years cannot readily be overcome, but it is right to express appreciation of the remaining experienced officers who have carried out their exacting duties, in the established tradition of efficient service to the community.

JOSEPH WALKER, M.S.I.A.

RAINFALL IN INCHES FOR THE YEAR

	1951	1952
January	3·60	4·73
February	3·52	1·04
March	3·16	1·61
April	2·08	1·77
May	2·94	1·25
June	2·32	3·19
July	4·99	2·19
August	5·61	6·16
September	3·10	2·26
October	1·36	4·39
November	8·11	3·42
December	5·75	5·05
	46·54	37·06

Data kindly supplied by the Belfast City and District Water Commissioners. Readings taken at Oldpark Station. Gauge at 200 feet O.D.

REPORT OF THE CITY VETERINARIAN FOR THE YEAR 1952.

Report of the work at the Belfast Municipal Abattoir in connection with Ante-Mortem and Post-Mortem examinations of animals slaughtered for human food.

TABLE 1

Showing by months the number and description of animals slaughtered during the year

	Cows	Heifers	Bulls	Bullocks	Calves	Sheep and Lambs	Goats	Pigs
January	1,533	432	7	2,722	1,069	5,111	618	682
February	792	362	5	2,342	1,179	3,320	953	796
March	704	234	1	1,561	1,093	6,754	369	508
April	646	230	—	2,049	778	7,494	281	614
May	402	119	1	1,147	273	11,468	119	653
June	746	249	—	1,386	93	15,843	99	503
July	802	432	4	2,137	155	9,688	28	499
August	626	589	2	2,433	645	8,030	18	1,598
September	357	800	4	3,070	1,065	8,489	36	693
October	383	694	—	3,189	1,469	8,729	79	471
November	212	517	1	3,441	771	8,076	192	694
December	310	497	7	3,413	523	9,129	287	991
TOTALS	7,513	5,155	32	28,890	9,113	102,131	3,079	8,702

Compared with the year 1951, Cattle show a decrease of 5,019; Sheep and Lambs an increase of 13,307; Pigs a decrease of 1,303 and Goats a decrease of 2,949.

TABLE 2

Showing the number of carcasses condemned from all causes during the year 1952 as being unsound and unfit for human food, as compared with the year 1951

	1952	1951
Cows	177	518
Heifers	43	55
Bulls	—	1
Bullocks	64	60
Calves	757	998
Sheep and Lambs	224	149
Goats	63	144
Pigs	183	236
Totals	1,511	2,161

The percentage of carcasses condemned from all causes at the Public Abattoir during the year 1952 was .91 per cent.

TABLE 3

Showing the different diseased conditions which involved seizure and total destruction of carcasses in the Public Abattoir during the year 1952

	CATTLE				Sheep	Goats	Pigs	Total
	Cows	Heifers	Bullocks	Calves				
Anaemia	—	—	—	—	4	—	1	5
Arthritis	—	—	—	—	1	—	2	3
Bone taint	—	—	1	—	—	—	—	1
Cysticercus Bovis	—	2	1	—	—	—	—	3
Decomposed	—	—	—	—	3	—	—	3
Dropsical and Emaciated	16	2	7	244	107	59	33	468
Enteritis	—	—	1	1	—	—	9	11
Fevered	17	5	7	223	41	1	35	329
Fibrosis	—	—	—	—	—	—	—	—
Gangrene	1	1	—	—	1	—	—	3
Injured	8	5	4	11	19	1	1	49
Immature	—	—	—	230	3	—	—	233
Joint Ill	—	—	—	32	—	—	—	32
Leukaemia	—	1	—	—	1	—	—	2
Neoplasms	1	—	1	—	—	—	—	2
Oedema	—	—	—	—	—	—	2	2
Osteomyelitis	—	—	—	1	—	—	1	2
Pleurisy or Peritonitis	4	—	1	4	4	—	13	26
Pyæmia	1	—	1	1	2	—	17	22
Red Water	1	2	5	—	—	—	—	8
Septicaemia	7	1	2	—	18	1	17	46
Septic Mastitis	15	—	—	—	4	—	1	20
Septic Nephritis	—	—	—	—	—	—	1	1
Septic Metritis	2	—	—	—	1	—	1	4
Septic Pneumonia	1	—	1	3	15	—	4	24
Tuberculosis	103	25	32	7	—	1	40	208
TOTALS	177	44	64	757	224	63	178	1,507

In addition to the above summary, there were 9 tons, 13 cwt., 0 qrs., 14 lbs., Tuberculosis; 41 tons, 12 cwts., 1 qr., 21 lbs., of Injured Beef; 47 cwts., 2 qrs., 18 lbs., of Mutton, and 3 tons 10 cwts., 1 qr., 6 lbs. of Pork seized as being unsound and unfit for human food.

TABLE 4

Showing comparison between Tuberculosis and other diseases as causes of condemnation of carcasses of animals slaughtered at the Public Abattoir during the year 1952

Tuberculosis

	CATTLE			Sheep Lambs	Goats	Pigs	Total
	Cows	Cattle	Calves				
Total Seizure	103	57	7	—	1	40	208
Partial Seizure	324	461	—	—	—	—	785
Total and Partial	427	518	7	—	1	40	993

Other Diseased Conditions

	CATTLE			Sheep Lambs	Goats	Pigs	Total
	Cows	Cattle	Calves				
Total Seizure	74	51	750	224	63	178	1,340
Partial Seizure	862	3,814	48	1,224	17	1,392	7,357
Total and Partial	936	3,865	798	1,448	80	1,570	8,697

It will be seen from the above table that tuberculosis in cattle is a most fruitful source of total seizure, accounting for about 53 per cent of the seizures, as compared with other diseased conditions.

TABLE 5

Showing the percentage by age periods of the animals slaughtered and condemned at the Public Abattoir as suffering from Tuberculosis

SPECIES	BY AGE							
	From one month to one year	Per Cent	One to three years	Per Cent	From three to six years	Per Cent	Over six years	Per Cent
Cows	—	—	—	—	2	1.94	101	98.05
Heifers	—	—	6	24.0	19	76.0	—	—
Bulls	—	—	—	—	—	—	—	—
Bullocks	—	—	1	3.12	31	96.87	—	—
Calves	7	100.0	—	—	—	—	—	—
Pigs	40	100.0	—	—	—	—	—	—
Goats	—	—	1	100.0	—	—	—	—

TABLE 6

Showing the percentage by condition of the animals slaughtered and condemned at the Public Abattoir during the year as suffering from Tuberculosis

SPECIES	BY CONDITION							
	Good		Fair		Indifferent		Poor	
	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Cows	1	.97	19	18.44	70	67.96	13	12.62
Heifers	1	4.0	23	92.0	—	—	1	4.0
Bulls	—	—	—	—	—	—	—	—
Bullocks	—	—	30	93.75	2	6.25	—	—
Calves	—	—	—	—	7	100.0	—	—
Pigs	—	—	40	100.0	—	—	—	—
Goats	—	—	—	—	1	100.0	—	—

TABLE 7

Showing the number of Diseased Organs seized and destroyed during the year 1952 as being unsound and unfit for human food. (The figures for the preceding year are given for comparison)

	1952	1951	Increase	Decrease
Beef:				
Heads	429	999	—	570
Tongues	794	1,019	—	225
Hearts	429	686	—	257
Lungs	4,950	6,362	—	1,412
Livers	16,967	22,435	—	5,468
Stomachs	770	1,294	—	524
Udders	3,197	6,092	—	2,895
Mesenteries and Intestines	770	1,288	—	518
Omentum	770	1,288	—	518
Diaphragm	18	21	—	3
Kidneys	27	35	—	8
Mutton:				
Hearts	12	24	—	12
Lungs	264	1,237	—	973
Liver	8,878	9,988	—	1,110
Kidneys	10	12	—	2
Pork:				
Heads	240	281	—	41
Tongues	240	281	—	41
Hearts	186	382	—	196
Lungs	285	367	—	82
Liver	263	386	—	123
Kidneys	28	43	—	15
Goat:				
Liver	74	106	—	32

The above does not include the viscera of animals totally destroyed.

TABLE 8

Showing percentage incidence of generalised Tuberculosis in animals slaughtered at the Public Abattoir during the year 1952. The percentage for the previous year is given for comparison

	1952	1951
Cows	1·37	1·40
Other Cattle	·16	·17
Cattle (all classes)	·38	·72
Calves	·07	·12
Pigs	·45	·43

TABLE 9

Table showing the amount of Beef, Mutton, Pork, etc., presented by the prevention officers of the Ministry of Food and others for examination at the Abattoir

BEEF	.....	.....	.....	74 Sides, 103 Quarters and 293 Cuts were examined; of these 42 cwts., 3 qrs., 12 lbs., were seized and destroyed.
MUTTON	.....	.....	.....	38 Carcases and 20 Cuts were examined: seized and destroyed, 25 Carcases and 82 lbs.
PORK	.....	.....	.....	14,543 Carcases examined; seized and destroyed, 494 Carcases and 184 cwts., 1 qr.
VEAL	.....	.....	.....	Carcases examined 2; seized and destroyed 2.
FOWL	.....	.....	.....	Examined 722; seized and destroyed 722.
TINNED MEATS	.....	.....	.....	Examined 63; seized and destroyed 63.
FISH AND FOWL MARKETS				Seized or surrendered; 1 ton, 14 cwts., 3 qrs., of Herrings, Kippers, etc.

Cysticercus Bovis

During the year *cysticercus bovis* infections were shown to be present to the extent of .45 per cent of all bovines slaughtered at the Abattoir; compared with the previous year 1951 this shows an increase of .18 per cent.

During the year there were three instances in which the disease appeared in a generalised form (Table 3), the parasite being widely distributed throughout the carcase musculature. In all other instances the parasite was confined to the masseter muscles of the animal.

This parasite is of great importance from a meat inspection aspect as it is communicable to man if the meat is eaten in raw or improperly cooked state, giving rise to the tape worm "*Taenia Saginata*."

Services Rendered to Other Departments

During the year a general supervision of the health of the animals of the several Committees of the Corporation was exercised. Fortunately most of the work during the year was in the nature of preventive medicine.

Abattoir

There are no private Slaughter Houses in the City, so that all animals to be slaughtered in Belfast for human consumption must be brought to the Public Abattoir.

The Abattoir is situated in Stewart Street, adjacent to the Cattle Market and Cattle Yards.

The Slaughter of Animals Act (Northern Ireland), 1932, makes it compulsory for all animals slaughtered for human food to be stunned by means of a mechanically-operated instrument and rendered insensible to pain until death supervenes.

The Abattoir is designed so that the slaughter of cattle, sheep and pigs is carried out in three different departments. The lairages for the different animals are quite convenient to the killing booths, yet the animals cannot see their fellows being slaughtered. The cooling halls are situated quite close to the slaughter halls and all carcasses can be easily conveyed there by means of an overhead rail system.

The cattle slaughter halls are a combination of the open halls and booth system.

The sheep unit consists of two extensive slaughter halls with lairages and cooling halls attached.

An extensive cold storage plant is attached to the Abattoir, and during the summer months this is utilised to a great extent by the trade.

According to the By-Laws, all persons employed in the slaughtering and dressing of animals must be licensed and during the year 71 such licences were issued.

All the larger animals at the Abattoir are stunned by means of a Cash Captive Bolt Gun prior to bleeding, and in the case of smaller animals an electrical apparatus known as an Electrothaler is used.

To my staff for their loyal support and manner in which they carried out their duties at all times, I say, thanks.

ALEX. McLEAN, B.Sc., M.R.C.V.S., D.V.H.

**REPORT OF SENIOR MEDICAL OFFICER, MATERNITY AND CHILD
HEALTH DIVISION, FOR THE YEAR 1952.**

Notification of Births Act

The total number of births notified as occurring in the area during the year was 10,715 ,and in addition 15 were either discovered by Health Visitors or notified by the Registrars of Births, making a total of 10,730. Of these 5,552 were males, 5,177 were females, 1 sex unknown and 314 were still-births.

These were classified as follows:—

In Hospitals	6,294
In Private Nursing Homes	527
In other Institutions	160
At Home	3,531
At Home (Hosp. Dist. Cases)	218

Infant Mortality

During the year 399 children died under the age of 12 months giving an infant mortality rate of 47. The rate for the previous year was 44.

Prematurity, diarrhoea and enteritis, and pneumonia accounted for 51·4 per cent of the infant mortality.

Table A shows the number of deaths from these conditions and the death rate per 1,000 registered births during the past ten years.

Table B shows the infant mortality grouped according to cause and sex.

Table C shows the infant mortality by age groups.

Neo-Natal Mortality

Deaths occurring during the first month of life numbered 213, giving a neo-natal rate for the year of 25. The rate for the previous year was 24.

Maternal Mortality

The number of women who died from pregnancy, childbirth and the puerperal state during the year was 9, giving a maternal mortality rate of 1.06 per 1,000 live births. The rate shows an increase over the figure recorded for the past two years. The additional deaths were mainly due to toxæmia of pregnancy and post-partum hæmorrhage. One death, however, was due to sepsis of childbirth, now an infrequent cause of maternal mortality.

Table D shows the maternal mortality per 1,000 live births analysed according to the cause of death.

Health Visiting

36 Health Visitors were employed at the end of the year, a considerable number below our requirements. The difficulty in obtaining a sufficient number of suitable applicants for the work continues, and the only solution seems to be the temporary employment of suitable candidates with a view to their being subsequently seconded to the Health Visitors' Training Course.

The routine visiting of infants and young children continued throughout the year, and, in addition, many special visits were made in connection with defective children, infectious diseases, and after-care services. In regard to the latter the health visiting link with the hospitals has been most advantageous, and a liaison health visitor now visits the various hospitals with which our work is intimately connected.

We were again glad to co-operate with the Departments of Social Medicine and Child Health of Queen's University in follow-up work in connection with one or two surveys.

Members of the Health Visiting Staff had the opportunity of attending several refresher lectures, and one of the Nursing Officers attended a refresher course for Public Health Workers in London.

Visits paid during the year were as follows:—

- 1. To expectant mothers: First visits, 672; Revisits, 996; Total, 1,668.
- 2. To children under one year of age: First visits, 8,130; Revisits, 53,459; Total, 61,589.
- 3. To children between 1 and 5 years: Total, 48,984.

Liaison was maintained with the Welfare Authority to ensure that registered foster mothers received adequate health visitation as to the infants in their care.

Ante-Natal Clinics

As the majority of the expectant mothers who are being confined at home now engage a doctor for maternity services, the patients attending the antenatal clinics are mainly those who intend going into hospital for their confinement. A close liaison is therefore maintained with the maternity hospitals to which they are being admitted. Blood tests are carried out as a routine in all cases for blood group, Rh. factor, Wassermann, etc., and instruction in Gas and Air Analgesia is combined with instruction in relaxation, which has been found by the mothers to be of great assistance during the confinement.

The special mothercraft talks were continued during the year, combined with the use of a film strip projector. Much attention was again paid to instruction in the care and preparation of the breasts for breast feeding. Plastic nipple shields were prescribed in certain cases and were available at the clinics.

Clinics and Attendances:

	1st Visit	Re-Visits
Spier's Place, Shankill Road (Monday)	126	730
Grovefield School, Mount Street (Monday)	114	749
Mersey Street Church Hall	140	790
Mountcollyer Street	156	893
Spier's Place, Shankill Road (Wednesday)	143	846
Oldpark Unionist Hall, Avoca Street	172	815
St. Paul's Hall, Hawthorne Street	229	1,116
Grovefield School, Mount Street (Wednesday)	89	665
	1,169	6,604

Child Health Centres

The number of sessions provided at the end of the year was 32. Two new centres were opened, one at Palmerston Road, Sydenham, and the other at Highfield, Ballygomartin Road. Small temporary huts have been rented on a sessional basis, and although well sited are not suitable for the purpose, but may tide over until more satisfactory permanent buildings are available in these two rapidly growing districts. An additional session was also provided at the Falls Road centre.

The attendance at the centres was very good and continued to grow throughout the year, the total being considerably over that for the previous year.

In talks to the mothers special emphasis has been placed on the prevention of accidents in the home, and in this connection the use of film strips has been of great assistance in illustrating the various points.

Our thanks are again due to the members of the Voluntary Workers Association, not only for their continued valuable assistance at the centres but also for organising various social activities for the benefit of the mothers and infants.

Centres and Attendances:

						Under 1 year	Over 1 year
Highfield	(Monday)	.....	.....	.....	.....	1,880	824
York Street	„	.....	.....	.....	.....	2,314	707
Ariel Street	„	.....	.....	.....	.....	1,505	278
Bloomfield	„	.....	.....	.....	.....	3,195	1,237
Donegall Road	„	.....	.....	.....	.....	2,606	617
Glenard	(Tuesday)	.....	.....	.....	.....	3,148	671
Havelock Place	„	.....	.....	.....	.....	3,798	1,135
Mersey Street	„	.....	.....	.....	.....	3,371	692
Donegall Road	„	.....	.....	.....	.....	4,533	1,480
Falls Road	„	.....	.....	.....	.....	4,961	2,834
Ariel Street	„	.....	.....	.....	.....	3,329	1,215
Avoca Street	(Wednesday)	.....	.....	.....	.....	1,868	276
Bread Street	„	.....	.....	.....	.....	3,615	1,358
Ligoniel	„	.....	.....	.....	.....	2,141	421
Seaview	„	.....	.....	.....	.....	2,367	680
Woodstock	„	.....	.....	.....	.....	5,139	1,247
Palmerston Road	„	.....	.....	.....	.....	1,173	448
Avoca Street	(Thursday)	.....	.....	.....	.....	4,654	698
Kimberley Street	„	.....	.....	.....	.....	4,265	1,416
Greencastle	„	.....	.....	.....	.....	2,662	1,233
Mountcollyer	„	.....	.....	.....	.....	3,191	709
Spier's Place	„	.....	.....	.....	.....	2,519	572
Susan Street	„	.....	.....	.....	.....	4,535	1,934
Woodstock	„	.....	.....	.....	.....	4,201	856
Malone	(Friday)	.....	.....	.....	.....	1,147	1,146
Ariel Street	„	.....	.....	.....	.....	1,924	303
Bread Street	„	.....	.....	.....	.....	3,829	1,668
Joanmount	„	.....	.....	.....	.....	1,789	522
Spier's Place	„	.....	.....	.....	.....	3,649	762
Sydenham	„	.....	.....	.....	.....	4,978	1,209
Woodstock	„	.....	.....	.....	.....	3,599	1,586
Falls Road	„	.....	.....	.....	.....	406	131
Total Attendances						98,291	30,865

Home Help Scheme

The Home Help work continued along previous lines being mainly devoted to Maternity cases and cases of sickness among mothers of small children. A subsidiary panel continued to deal with tuberculosis cases by arrangement with the Northern Ireland Tuberculosis Authority. Arrangements were also made in conjunction with the Welfare Authority for the recruitment of casual home helps for the care of the aged and of handicapped persons. The Health Visitor was responsible for the supervision of the home helps working in her district in the main Scheme, and as the households were on the whole the same as those in which she was visiting in the course of her other duties the arrangement fitted in very well.

Notwithstanding the fact that the number of aged people in the community is increasing there is no doubt that the bulk of the work will continue to be devoted to maternity and allied cases.

Arrangements were made during the year for the granting of holiday leave to home helps on the completion of twelve months service on the panel.

- (a) Number of Home Helps employed at end of year:
- (i) Whole time, 127; (ii) Part time, 39.
- (b) Number of cases attended during the year:
- (i) Maternity, 743; (ii) Others, 267; (iii) Total, 1,010.

Mother and Baby Homes (Ante and Post-Natal Hostels)

Name and address of Home or Hostel	NUMBER OF BEDS						Average length of stay	
	Ante-Natal	Post Natal	Labour	Isolation	Maternity (excluding labour and isolation)	Cots	Ante-Natal	Post Natal
(a) Hopedene	3	11	—	—	—	11	4-6 weeks	3-4 months
(b) Thorndale	8	31	2	2	17	31	5 weeks	22 weeks

The total number of City cases admitted during the year to these hostels was 103.

These hostels are in receipt of a grant from the Health Committee.

Residential Nurseries

Name and address of Nursery	Whether long stay or short stay	Number of Beds provided at the end of year				
		Aged 0-9 mths.	10 mth.-2 years	Aged 2-5	Girls over 5	Boys over 5
Glendhu Hostel, Hollywood Road (A voluntary Hostel in receipt of a grant from the Health Committee).	Short Stay	12	6	5	6	6

221 children resident in Belfast were admitted to the Hostel during the year.

Communicable Diseases

	(1) Ophthalmia Neonatorum		(2) Pemphigus Neonatorum		(3) Puerperal Fever		(4) Puerperal Pyrexia	
	Dom. Confine- ments	Instit. Confine- ments	Dom. Confine- ments	Instit. Confine- ments	Dom. Confine- ments	Instit. Confine- ments	Dom. Confine- ments	Instit. Confine- ments
Number of cases NOTIFIED during year	1	2	—	—	—	—	8	44
Number of cases visited by Officers of the Local Authority	1	2	—	—	—	—	—	—
Number of cases removed to hospitals	1	—	—	—	—	—	—	—

In all of the above cases of Ophthalmia Neonatorum the vision appeared to be unimpaired at the end of the treatment.

Midwives

	Domiciliary Midwives	No. in Inst. other than Hospitals	Midwives in Hospitals	Midwives in Nursing Homes	Total
1. Total number of Midwives practising at the end of the year in the area of the Local Supervising Authority	75	7	125	20	227
(a) Employed by the Local Supervising Authority (Part Time)	68	—	—	—	—
(b) Solely in private practice	7	—	—	—	—

Number of cases in which Medical Aid was summoned during the year under Section 22 of the Midwives (Ireland) Act, 1918, by a midwife:—

(i) For domiciliary cases	37
(ii) For cases in Institutions other than Hospitals	24
Total	61

Two midwives were suspended for short periods during the year in order to prevent the spread of infection.

Midwifery

Arrangements were made for the supply of uniform and the granting of a laundry and travelling allowance to midwives on the domiciliary panel. Equipment is also issued on loan, and all drugs, dressings, etc., in use in their practice are supplied to the midwives, the majority of whom are qualified to use pethidine under the Dangerous Drugs Regulations which came into operation during the year. Supply orders are issued for the purchase of this drug from chemists.

Special cots, etc., for the care of premature babies continue to be issued on loan.

A course of refresher lectures was again arranged during the autumn and winter, and films and film strips on various aspects of midwifery were also displayed.

Registration of Nursing Homes

	Number of Homes	Number of beds provided for:—		
		Maternity	Dual Purposes	Total
Homes first registered during the year	—	—	—	—
Homes on the register at the end of the year	22	75	58	133

Action during 1952:

Number of applications for registration refused	.....	.....	.....	—
Number of exemptions granted	.....	.....	.....	—
Number of exemptions withdrawn	.....	.....	.....	—
Number of registrations cancelled	.....	.....	.....	—
Number of appeals by aggrieved persons to a Court of Summary Jurisdiction	.....	.....	.....	—
Number of cases in which fines were imposed	.....	.....	.....	—
Number of inspections	.....	.....	.....	240
Number of registered homes not inspected	.....	.....	.....	—

The inspections during the year were made by the Assistant Medical Officer, the Superintendent Nursing Officer and the Assistant Superintendent Nursing Officers.

In conclusion I would like to express to the members of the staff my sincere appreciation of the excellent manner in which they discharged their duties throughout the year.

H. A. WARNOCK, M.D., B.Sc., D.P.H.

TABLE A

Showing the number of Deaths of Infants under one year from Prematurity, Diarrhoea and Enteritis, Pneumonia, Broncho-Pneumonia, and Bronchitis

	1943		1944		1945		1946		1947		1948		1949		1950		1951		1952	
	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births
Prematurity	240	22.40	211	20.18	155	15.73	132	12.78	107	10.19	118	12.11	126	13.72	107	12.11	102	11.61	108	12.69
Diarrhoea and Enteritis	287	26.79	178	17.02	166	16.85	112	10.84	105	10.00	61	6.26	101	11.00	37	4.19	45	5.12	57	6.70
Pneumonia, Broncho-Pneumonia and Bronchitis	247	23.06	171	16.35	154	15.63	129	12.49	167	15.90	80	8.21	88	9.58	88	9.96	52	5.91	40	4.70

TABLE B
Infant Mortality by Causes and Sex

CAUSES OF DEATH	Under 1 Month				1-11 Months			Total under 1 Year	
	Males	Females	Total	Rate per 1,000 live births	Males	Females	Total	No.	Rate per 1,000 live births
Tuberculosis of Respiratory System	—	—	—	—	—	—	—	—	—
Tuberculosis, other Forms	—	—	—	—	—	1	1	1	0·11
Syphilis and its sequelae	—	—	—	—	—	—	—	—	—
Scarlet Fever and Streptococcal sore throat	—	—	—	—	—	—	—	—	—
Typhoid	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	4	4	8	8	0·94
Meningococcal Infections	—	—	—	—	3	—	3	3	0·35
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	2	2	2	0·24
Other Infectious and Parasitic Diseases	—	—	—	—	1	2	3	3	0·35
Diabetes Mellitus	—	—	—	—	—	—	—	—	—
Non meningococcal Meningitis	—	—	—	—	1	3	4	4	0·47
Influenza	—	—	—	—	1	—	1	1	0·11
Pneumonia	—	—	—	—	37	20	57	57	6·70
Bronchitis	—	—	—	—	—	—	—	—	—
Intestinal Obstruction and Hernia	—	1	1	0·11	5	2	7	8	0·94
Gastritis, Duodenitis, Enteritis and Colitis, except Diarrhoea of the new born	—	—	—	—	25	15	40	40	4·70
Cirrhosis of Liver	—	—	—	—	—	—	—	—	—
Nephritis and Nephrosis	—	—	—	—	—	—	—	—	—
Congenital Malformations	19	17	36	4·2	10	13	23	59	6·93
Birth Injury, Postnatal Asphyxia and Atelectasis	—	—	—	—	—	—	—	—	—
(a) with prematurity	35	25	60	7·1	1	1	2	62	7·28
(b) without prematurity	26	11	37	4·3	2	—	2	39	4·58
Infections of New-Born	—	—	—	—	—	—	—	—	—
(a) with prematurity	1	—	1	0·11	—	—	—	1	0·11
(b) without prematurity	11	7	18	2·11	—	—	—	18	2·11
Other Diseases peculiar to Early Infancy	—	—	—	—	—	—	—	—	—
(a) with prematurity	25	16	41	4·8	1	3	4	45	5·29
(b) without prematurity	9	1	10	1·1	1	1	2	12	1·41
Ill-defined and Unknown Causes	1	—	1	0·11	3	—	3	4	0·47
All other Causes	4	—	4	0·46	7	4	11	15	1·76
Benign and unspec. neoplasms	—	—	—	—	—	—	—	—	—
Accidents	1	3	4	0·46	9	3	12	16	1·88

TABLE C
Infant Mortality (By Age Groups)

Sex	Under 1 day	1 day and less than 7 days	1-4 weeks	1-2 months	2-3 months	3-6 months	6-12 months	Total	Deaths of Illegitimate children
Males	57	54	21	27	15	46	24	244	14
Females	37	34	10	17	8	25	24	155	7
Total	94	88	31	44	23	71	48	399	21

TABLE D

Showing the Maternal Mortality Rate per 1,000 live births analysed according to the cause of death

Cause of Death	No. of Deaths	Rate per 1,000 Live Births
Infections of Genito-Urinary tract during pregnancy	1	0·11
Toxaemia of Pregnancy	3	0·35
Other complications arising from pregnancy	1	0·11
Abortion without mention of sepsis or toxaemia	1	0·11
Delivery complicated by other post-partum haemorrhage	2	0·23
Sepsis of childbirth and the puerperium	1	0·11

TABLE E

Showing the Deaths of Children under one year old per 1,000 births each year from 1933–1952.

YEAR	Deaths per 1,000 Births	YEAR	Deaths per 1,000 Births
1933	102	1943	111
1934	80	1944	89
1935	112	1945	84
1936	101	1946	61
1937	94	1947	60
1938	96	1948	45
1939	85	1949	56
1940	122	1950	49
1941	91	1951	44
1942	92	1952	47

Home Nursing Service

The demand for the services of the District Nurse for nursing attention to patients in their own homes continues to increase. The total number of visits paid during this year was 143,593 in comparison with 119,898 during 1951.

The Key Training Home was transferred from 100 Botanic Avenue to 1/2 College Park East on November 1st; this necessitated the postponing of the entry of students until a later date. The number of students trained during the year was 16; eleven were staff candidates and five seconded from the Counties.

The Queen's Institute Inspector, Miss Irven, visited the Home four times during the year for the practical examination of candidates. In January she made a general inspection of all Queen's Nurses on the staff.

Miss Watkinson, Superintendent, attended a Conference of Training Home Superintendents in London on 14th and 15th March, 1952. Miss Ritchie, Assistant Superintendent, attended a Refresher Course at Roffey Park Institute, Sussex on 4th–9th October, 1952, organised by the Queen's Institute of District Nursing for Superintendents and Assistant Superintendents.

Home Nursing Service

	On Books 1/1/52	Convalescent	Died	Hospital	Removed Other Causes	Loans	Children Nursed	Cases Attended	T. B. Cases	T. B. Visits	Cancer Cases	Cancer Visits	Diabetic Cases	Diabetic Visits	Gynaecological Cases	Gynaecological Visits	Pneumonia Cases	Pneumonia Visits	Surgical Cases	Surgical Visits	Medical Cases	Medical Visits	Total Visits
Knock	18	53	11	12	8	3	12	102	5	123	4	104	2	775	—	—	3	22	10	579	78	1,431	3,034
Ballymacarrett	23	113	30	20	21	23	9	207	12	317	17	283	6	317	—	—	12	123	20	523	140	2,515	4,078
Ballymacarrett Aux.	32	84	32	21	1	24	22	170	6	462	9	415	5	1,480	—	—	3	27	16	100	131	3,619	6,103
Bloomfield	32	121	32	29	14	19	11	237	18	187	13	310	9	1,189	44	44	14	98	16	814	164	3,338	5,980
Castlereagh	32	90	26	12	7	17	12	167	13	148	11	730	5	288	—	—	9	188	15	1,249	114	1,726	4,329
Castlereagh Aux.	36	95	28	27	6	7	19	194	14	606	14	490	12	2,114	—	—	13	133	40	1,455	101	1,573	6,371
Springfield	21	41	20	9	4	10	8	94	5	71	3	150	4	403	10	10	3	21	16	809	61	1,926	3,390
Springfield Aux.	25	144	25	28	15	24	16	137	8	198	29	186	4	98	92	92	49	446	38	524	98	1,554	3,098
Grosvenor Road	18	44	14	12	2	23	8	90	4	374	2	168	—	—	17	17	3	26	33	1,357	47	1,691	3,633
Falls	27	52	17	20	—	6	6	116	3	118	2	100	7	2,177	46	46	4	30	19	415	80	1,431	4,317
Falls Auxiliary	23	47	16	10	1	15	10	97	7	268	7	289	15	3,574	51	51	3	21	10	1,021	53	875	6,099
Ormeau Road (Cromac)	15	61	17	22	6	9	12	121	13	229	5	178	3	733	—	—	2	12	18	374	80	2,586	4,112
Markets	28	81	18	20	1	41	19	148	7	63	6	335	8	1,264	60	60	3	62	39	1,120	84	2,879	5,783
Lisburn Road (Sandy Row and Malone)	30	92	31	28	2	4	10	183	7	185	5	447	3	298	—	—	3	100	14	645	151	3,883	5,558
Sandy Row Auxiliary	172	94	21	22	12	11	10	172	6	139	13	550	11	1,706	—	—	8	56	21	994	113	2,656	6,101
Donegall Road	6	92	13	22	31	26	2	135	4	290	5	78	3	165	—	—	4	71	61	674	87	1,086	2,364
Donegall Road Aux.	22	99	10	22	5	26	18	158	6	119	5	272	6	1,290	—	—	6	93	4	122	131	4,066	5,962
Stranmillis	13	35	13	6	1	7	4	68	1	17	4	318	1	277	—	—	7	86	10	463	45	2,554	3,715
Antrim Road	21	45	16	7	7	6	6	96	3	32	4	131	2	477	14	14	2	37	25	947	69	2,715	4,353
Cavehill	23	69	36	14	23	4	10	165	5	132	12	507	3	29	5	5	3	19	26	833	115	2,161	3,686
New Lodge	28	61	35	17	6	14	10	147	11	607	16	451	5	1,951	—	—	3	34	19	636	93	2,357	6,036
York Road	20	74	20	11	9	23	24	134	14	338	11	270	3	345	—	—	5	39	12	503	89	2,931	4,426
Greencastle	23	100	12	18	7	3	31	160	13	355	5	399	5	356	699	699	8	87	48	1,016	73	1,694	4,606
Crumlin Road	25	87	31	38	4	30	9	185	10	290	12	268	6	833	2	32	14	118	39	819	136	2,154	4,514
St. Anne's	30	97	24	24	12	24	24	187	6	85	11	1,150	7	263	—	—	9	84	53	2,064	101	6,730	10,376
Ligoniel	14	63	22	11	4	3	14	114	3	112	4	118	2	44	—	—	11	90	20	512	74	1,597	2,473
Ligoniel Auxiliary	18	106	25	19	10	4	22	178	10	1,043	10	469	2	298	—	—	12	93	34	271	114	2,450	4,624
Smithfield	41	91	17	15	—	70	29	164	4	68	3	313	6	3,258	—	—	8	81	44	1,411	99	5,396	10,527
Smithfield Auxiliary	20	45	20	7	—	34	6	92	1	18	2	27	5	1,156	—	—	6	121	10	302	68	2,321	3,945
	828	2,276	632	523	219	510	393	4,218	219	6,994	244	9,506	150	27,158	1,070	1,070	230	2,418	730	22,552	2,789	73,895	143,593

REPORT OF THE SENIOR MEDICAL OFFICER, SCHOOL HEALTH DIVISION, FOR THE YEAR 1952.

In presenting the report on the work of the School Health Services for the year, 1952, one can note with satisfaction that the Service has maintained its efficiency and effectiveness, and has been availed of to an increasing extent by parents and those others, such as teachers and welfare officers, who are so interested in the health of children.

Its effective working has been limited adversely by the lack of proper clinic accommodation. Although there are prospects of improvement in the not too distant future, yet any new development of the Service, which must and will take place, will always be hampered by lack of foresight in the provision here and there—especially in new premises—of space which can be used for such new developments. The lack of such spare accommodation will limit future effectiveness, and, if alternatively provided, will probably cost more. Then, being housed in ancillary premises will be more difficult and costly to administer in the long run. There are developments which can be foreseen now and provided for by such planning.

It is pleasing to report an improvement in the recruitment of suitable dental officers with a corresponding increase in the amount of work done. By contrast, we have been short of a full-time medical officer since the summer of 1951. Then there has been difficulty, too, in securing suitable health visitor staff because of lack of trainees and a suitable type of candidate.

With the co-operation of our Service, the Department of Social and Preventive Medicine of Queen's University carried out a pilot survey to determine the necessity for the immunisation by B.C.G. Vaccine of the child population against Tuberculosis. During the past year, it was decided that our staff would be responsible, acting for the Northern Ireland Tuberculosis Authority, for the testing of a selected group of pupils. These would be those due for a medical inspection in a certain age group, and any found to be in need of vaccination would be offered it through our clinics. All the necessary preliminary steps have been taken, so that, with the commencement of medical inspection in 1953, this new development will be put into operation. It will throw much more work on to our medical officers, and will entail close co-operation between teachers, parents, pupils and staff, and we trust that it will be a big step forward in the preventive work against Tuberculosis.

Reference has been made before to medical and dental inspections carried out in voluntary grammar schools electing to operate their own schemes. Time and experience have only emphasised the necessity to lay down hard and fast conditions for the carrying out of this work. It has been obvious, from the condition in which the records are submitted, that there is not a full appreciation of the necessity for greater care about the recordings, and subsequent action. Comparison of the findings with those of our Service, indicates that the time has come for revision of the schemes. In several cases it has been difficult to obtain records in time for inclusion in the annual report.

The provision of spectacles for school children continues to function through the Supplementary Eye Services Scheme. After consideration of its working, a special committee has recommended that this arrangement should cease, and that all such prescribing should be carried out, either in hospital or local authority clinic, in which oculists, and opticians working under their direction, would function. This will require an alteration in the present Act, and will depend on government decision. If passed it would bring our method of working back to what it was formerly, whereby practically all spectacles provided, whether paid for or free, were supplied through the clinics. However, at present there is one aspect of this Service which effects the Local Authority closely, in that they have to pay for the replacement or repair of spectacles which are damaged. There are those which the Hospital Authority decide are not their responsibility because the damage was due to carelessness. The Local Authority is, therefore, made to pay for the replacements, etc., and, in certain cases, has had to foot the bill more frequently than necessary. It would be a distinct deterrent if the parent had to repay these charges, provided that necessitous cases were suitably handled.

T. F. S. FULTON, M.B., D.P.H.

Medical Inspection

As reported previously medical inspection has been carried out either by the medical officers appointed to those "private secondary" schools which elected to provide their own scheme or by the staff of the Health Department. The latter have visited all the other schools in the City, both "public" and "preparatory and grammar."

The Local Authority Scheme has worked as smoothly as formerly, assisted as it is by the close co-operation of the Principals and Heads of the schools visited. For the first time for some years the interest taken by teachers has been reflected by a very definite increase in the number of pupils referred by them for special examination. These are those who during the year were outside the routine age groups and did not come with the re-examination group either. This increased referral of 19% is very valuable indeed for in each case there is a good reason for its being put forward. The results of this cannot be measured by mere numbers for with it comes the co-operation of the teachers and eventually the parents.

Parental response to the invitation to be present at medical inspections continues to be very good despite the drop from 46·8% to 45·6% for the "public" schools and from 10% to 8·9% for the "preparatory and grammar." There have been no returns made as to the attendances of parents at "private secondary" schools inspections.

Absentees on the days of medical inspection varied according to the type of school visited. In all 1,422 children were absent. In the "preparatory and grammar" schools the percentage was 4·1, while in the "public" schools it rose to 6·3%.

The numbers examined in the various groups and the types of school involved are shown in the subjoined table.

TABLE 1

ROUTINES								Specials	Re-exam- inations	Totals
	Ages									
	Sex	3-6	8-9	11-12	Other Ages	14+	16+			
Primary and Inter.	Boys	3,384	3,670	2,561	202	3	—	996	8,034	18,850
	Girls	3,276	3,462	2,441	174	3	—	905	7,862	18,123
Prep. and Grammar	Boys	58	107	196	178	737	506	—	574	2,356
	Girls	64	104	161	142	372	215	—	454	1,512
Private Secondary	Boys	52	39	71	4	96	57	—	—	319
	Girls	124	115	278	83	288	130	—	—	1,018
		6,958	7,497	5,708	783	1,499	908	1,901	16,924	42,178

Vaccination

In the following table it will be seen that approximately 25% of the younger age groups have been unsatisfactorily protected by vaccination against smallpox.

TABLE 2

		3-6			8-9			11-12			Other Ages			14			16		
		Exd.	Unsatis- factory	%	Exd.	Unsatis- factory	%	Exd.	Unsatis- factory	%	Exd.	Unsatis- factory	%	Exd.	Unsatis- factory	%	Exd.	Unsatis- factory	%
Primary and Intermediate	Boys	3,384	870	25.7	3,670	862	23.5	2,561	747	29.2	202	48	23.8	3	1	33.3	—	—	—
	Girls	3,276	888	27.1	3,462	779	22.5	2,441	684	28.0	174	40	23.0	3	1	33.3	—	—	—
Preparatory and Grammar...	Boys	58	5	8.6	107	21	19.6	196	41	20.9	178	28	15.7	737	160	21.7	506	104	20.6
	Girls	64	16	25.0	104	16	15.4	161	44	27.3	142	25	17.6	372	71	19.1	215	40	18.6
Private Secondary	Boys	52	9	17.3	39	4	10.3	71	16	22.5	4	—	—	96	18	18.8	57	10	17.5
	Girls	124	20	16.1	115	27	23.5	278	67	24.1	83	23	27.8	228	48	16.7	130	21	16.2
All Schools	Boys	3,494	884	25.3	3,816	887	23.2	2,828	804	28.4	384	76	19.8	836	179	21.4	563	114	20.2
	Girls	3,464	924	26.7	3,681	822	22.3	2,880	795	27.6	399	88	22.1	663	120	18.1	345	61	17.7
	Totals	6,958	1,808	26.0	7,497	1,709	22.8	5,708	1,599	28.0	783	164	20.9	1,499	299	19.9	908	175	19.3

Average Heights and Weights

In the accompanying tables are set forth the average heights and weights of those examined in the various age groups. It should not be long before the results of the Anthropometric Survey of Northern Ireland children, recently carried out, are available. The availability of such contrasting figures should make such figures as those set forth below more instructive.

TABLE III
Average Heights and Weights

Boys									
Ages	Number Examined			Average Height, Inches			Average weight, lbs		
	" Public "	Grammar	Private Grammar	" Public "	Grammar	Private Grammar	" Public "	Grammar	Private Grammar
4	96	4	4	41.2	43.7	43.4	39.5	45.7	43.8
5	2,152	46	28	43.3	44.6	45.4	42.5	44.9	46.7
6	1,136	8	20	44.9	47.1	47.6	45.0	48.5	51.5
7	153	10	3	46.6	49.6	52.8	49.2	58.9	61.3
8	3,075	106	27	50.1	51.7	52.4	56.4	62.1	61.9
9	595	1	12	51.1	56.0	53.2	59.0	84.0	63.2
10	28	15	—	53.4	56.0	—	66.4	73.8	—
11	1,689	127	40	55.8	57.3	56.0	74.5	79.6	81.0
12	872	69	31	56.6	59.6	57.3	77.2	85.4	82.2
13	21	153	1	57.2	61.9	63.0	79.9	96.5	113.0
14	3	627	67	60.5	63.6	64.0	101.7	105.7	113.9
15	—	110	29	—	66.1	65.2	—	120.8	118.8
16	—	335	18	—	68.0	67.7	—	130.6	136.9
17	—	128	31	—	69.0	66.9	—	134.3	136.3
18	—	42	7	—	69.8	68.8	—	138.8	143.3
19	—	1	1	—	69.5	69.0	—	128.0	139.0

Girls									
Ages	Numbers Examined			Average Height, Inches			Average Weight, Lbs.		
	" Public "	Grammar	Private Grammar	" Public "	Grammar	Private Grammar	" Public "	Grammar	Private Grammar
4	121	10	11	41.4	43.3	41.6	39.2	41.4	44.3
5	2,029	54	78	42.8	44.7	44.7	40.7	46.3	45.6
6	1,126	19	35	44.4	46.5	47.1	43.6	47.1	49.3
7	123	23	18	46.1	49.4	49.1	46.1	55.3	55.3
8	2,840	100	64	49.8	51.0	51.2	55.0	58.4	60.8
9	622	4	51	50.6	51.5	53.0	57.3	59.8	65.8
10	20	26	33	53.6	57.0	55.3	65.0	77.5	75.7
11	1,623	100	127	55.7	58.0	56.8	73.7	81.5	80.8
12	818	61	151	56.8	60.8	58.6	78.5	87.4	89.4
13	31	93	32	58.1	62.5	62.2	88.2	102.1	102.9
14	3	300	195	64.3	63.1	62.1	116.0	109.7	111.0
15	—	72	93	—	64.1	63.5	—	122.6	122.1
16	—	160	68	—	68.5	63.9	—	126.0	123.1
17	—	48	48	—	68.8	64.5	—	124.3	125.1
18	—	7	13	—	68.6	63.9	—	118.7	126.7
19	—	—	1	—	—	63.5	—	—	144.0

Defects Discovered at Medical Inspection

Examination of the figures for the various types of schools set forth in the table brings out some interesting points.

First, one might generalise in stating that it is unlikely that any particular group would be liable to or avoid any particular defect simply because those concerned are to be found in a particular group. It is therefore peculiar that there should be on the whole more skin disease reported amongst

the " public " and " preparatory and grammar " scholars examined than amongst the " private secondary." This year the figures for the former have increased, while that for the latter are much less, both amongst those listed for treatment and those listed for observation and re-examination later on.

Defects of vision in the " preparatory and grammar " and " private secondary " groups are up but are cancelled out to some extent by a reduction in those for " observation." This year more pupils with squints were noted and amongst the " private secondary " schools many more than usual have been listed for re-examination later.

Concurrent with an initial recording of defective hearing in " private secondary " pupils there is a much increased return of ear disease though there has not been noted any incidence of chronic tonsillitis and/or adenoids.

Enlarged neck glands too have been markedly diminished though in one group more were relegated to the observation list.

Heart conditions showed a marked diminution amongst all three groups of pupils. By contrast bronchitis and other catarrhal chest conditions gave a marked increase in all three groups of those referred for treatment, but a reduction of those for future review.

The total number of pupils listed as suffering from anaemia increased in the " public " and " private secondary " groups almost equally. The figure for those in the " preparatory and grammar " schools was correspondingly lower.

For tuberculosis of bone and gland the over-all figures are bigger than in the previous year. Should such figures persist in future it would raise the question of the source of such infections which should get less and less in view of the increased supply of pasteurised milk and the drop in the incidence of human infection.

Rickets and rickety deformities still persist. They can be used as a barometer to indicate the efficiency of infant and toddler feeding. They are significant vis-a-vis the complaint of the Ministry that the free issue of cod liver oil is not being taken up properly.

TABLE IV

CLASSIFICATION	NATURE OF DEFECT		No. Exd.	Defective for Treatment	Per 1,000	Defective for Observation	Per 1,000
1. Skin Disease		P.	19,176	405	21·12	112	5·84
		P.G.	2,859	108	37·78	45	15·74
		P.S.	1,337	6	4·49	1	·75
2. Defects of the Eye	External Eye Disease	P.	19,176	142	7·4	141	7·35
		P.G.	2,859	17	5·95	16	5·6
		P.S.	1,337	1	·75	2	1·5
	Defective Vision	P.	12,248	1,452	118·55	372	30·37
		P.G.	2,692	144	53·49	151	56·09
		P.S.	1,143	108	94·49	50	43·74
	Squint	P.	19,176	475	24·77	556	29·0
		P.G.	2,859	16	5·6	33	11·54
		P.S.	1,337	9	6·73	13	9·72
	Discharging Ear	P.	19,176	134	7·0	146	7·61
		P.G.	2,859	7	2·45	8	2·8
		P.S.	1,337	6	4·49	3	2·24
3. Defects of the Ear	Other Diseases	P.	19,176	107	5·58	56	2·92
		P.G.	2,859	13	4·55	11	3·85
		P.S.	1,337	1	·75	3	2·24

TABLE IV—continued.

CLASSIFICATION	NATURE OF DEFECT		No. Exd.	Defective for Treatment	Per 1,000	Defective for Observation	Per 1,000
4. Defects of the Mouth, Nose and Throat	Defective Hearing (Other than above)	P.	19,176	124	6.47	45	2.35
		P.G.	2,859	6	2.1	6	2.1
		P.S.	1,337	3	2.24	—	—
	Ch. Tonsillitis	P.	19,176	1,084	56.53	2,291	119.47
		P.G.	2,859	27	9.44	150	52.47
		P.S.	1,337	18	13.46	48	35.9
	Adenoids	P.	19,176	74	3.86	48	2.5
		P.G.	2,859	—	—	2	.7
		P.S.	1,337	1	.75	3	2.24
	Ch. T. and Adenoids	P.	19,176	162	8.45	202	10.53
		P.G.	2,859	4	1.4	9	3.15
		P.S.	1,337	—	—	17	12.72
	Neck Gland Enlarged	P.	19,176	457	23.83	437	22.79
		P.G.	2,859	4	1.4	17	5.95
		P.S.	1,337	5	3.74	77	57.59
5. Defective Speech	Other Nose and Throat conditions	P.	19,176	353	18.41	220	11.47
		P.G.	2,859	23	8.04	19	6.65
		P.S.	1,337	—	—	2	1.5
6. Defects of the Heart and Lungs	Heart Conditions	P.	19,176	135	7.04	131	6.83
		P.G.	2,859	16	5.6	11	3.85
		P.S.	1,337	—	—	1	.75
7. Constitutional Diseases	Phthisis	P.	19,176	205	10.69	332	17.31
		P.G.	2,859	27	9.44	31	10.84
		P.S.	1,337	6	4.49	5	3.74
	Bronchitis, etc.	P.	19,176	—	—	2	.10
		P.G.	2,859	—	—	—	—
		P.S.	1,337	—	—	—	—
	Anaemia	P.	19,176	720	37.54	858	44.74
		P.G.	2,859	24	8.39	52	18.19
		P.S.	1,337	11	8.23	2	1.5
	Tuberculosis of Bone and Glands, etc.	P.	19,176	136	7.09	147	7.67
		P.G.	2,859	2	.7	7	2.45
		P.S.	1,337	7	5.24	5	3.74
	Rickets and Rickety Deformity	P.	19,176	6	.31	23	1.2
		P.G.	2,859	1	.35	1	.35
		P.S.	1,337	2	1.5	1	.75
8. Defects of the Nervous System	Defects of the Nervous System	P.	19,176	24	1.25	8	.42
		P.G.	2,859	1	.35	2	.7
		P.S.	1,337	—	—	—	—
9. Deformities other than due to Rickets	Defects of the Nervous System	P.	19,176	31	1.62	29	1.51
		P.G.	2,859	6	2.1	11	3.85
		P.S.	1,337	1	.75	1	.75
10. Other Diseases and Defects	Deformities other than due to Rickets	P.	19,176	667	34.78	323	16.84
		P.G.	2,859	123	43.02	48	16.79
		P.S.	1,337	11	8.23	8	5.98
	Other Diseases and Defects	P.	19,176	857	44.69	428	22.32
		P.G.	2,859	96	33.58	136	47.57
		P.S.	1,337	46	34.41	9	6.73

P—"Public." P.G.—"Prep. and Grammar." P.S.—"Private Secondary."

Nutrition

Estimates of the nutritional state of children depend entirely on the impressions made on the various medical officers and their individual interpretation of the varying conditions found. Some may have more experience than others and as there are no standards by which to arrive at a decision, the findings must be accepted with reserve.

TABLE V
Contrasting Findings in Different Types of School

AGE GROUP	SCHOOL		NORMAL (A)		SUB-NORMAL (B)		BAD (C)	
			Boys	Girls	Boys	Girls	Boys	Girls
Entrants ..	" Public "	Nos. %	2,615 74·08	2,360 69·45	804 22·78	932 27·43	111 3·14	106 3·12
	Prep. and Grammar	Nos. %	60 84·51	75 78·13	11 15·49	20 20·83	— —	1 1·04
	" Private Secondary "	Nos. %	51 98·08	114 80·29	— —	27 19·01	1 1·92	1 ·70
Second ..	" Public "	Nos. %	2,731 73·89	2,430 69·83	898 24·30	957 27·50	67 1·81	93 2·67
	Prep. and Grammar	Nos. %	114 83·82	133 90·48	22 16·18	14 9·52	— —	— —
	" Private Secondary "	Nos. %	39 92·86	120 90·23	3 7·14	12 9·02	— —	1 ·75
Third ..	" Public "	Nos. %	1,957 75·44	1,867 75·34	597 23·02	559 22·56	40 1·54	52 2·10
	Prep. and Grammar	Nos. %	254 93·73	180 84·11	17 6·27	32 14·95	— —	2 ·94
	" Private Secondary "	Nos. %	55 77·46	325 85·30	15 21·13	52 13·65	1 1·41	4 1·05
Fourth ..	" Public "	Nos. %	— —	— —	— —	— —	— —	— —
	Prep. and Grammar	Nos. %	693 93·65	303 90·45	46 6·22	32 9·55	1 ·13	— —
	" Private Secondary "	Nos. %	68 70·83	204 89·08	28 29·17	24 10·48	— —	1 ·44
Fifth ..	" Public "	Nos. %	— —	— —	— —	— —	— —	— —
	Prep. and Grammar	Nos. %	537 94·71	273 96·81	30 5·29	9 3·19	— —	— —
	" Private Secondary "	Nos. %	50 86·21	123 92·48	8 13·79	10 7·52	— —	— —
TOTALS ..	" Public "	Nos. %	7,303 74·37	6,657 71·15	2,299 23·41	2,448 26·17	218 2·22	251 2·68
	Prep. and Grammar	Nos. %	1,658 92·88	964 89·76	126 7·06	107 9·96	1 ·06	3 ·28
	" Private Secondary "	Nos. %	263 82·45	886 87·03	54 16·92	125 12·28	2 ·63	7 ·69

Visual Defects

In the following tables are set forth (1) the sex and age distribution of the visual defects found and (2) the incidence of defective vision in relation to the type of school attended.

In sub-table (1) the figures for the " public " schools remain much the same as last year.

In the " preparatory and grammar " school groups there are more pupils with defects in the 6/12—6/24 category amongst both boys and girls in the 2nd age group and amongst the girls in the fourth group. In the " private secondary " schools defects of this degree amongst boys and girls in the fifth age group have significantly increased in this year's returns.

TABLE VI (1)

Visual Acuity	Types of School	Second Age Group				Third Age Group				Fourth Age Group				Fifth Age Group				TOTALS			
		B	%	G	%	B.	%	G.	%	B.	%	G.	%	B.	%	G.	%	B.	%	G.	%
6/6—6/9, R. or L. Eye	Public	3,228	87.34	3,005	86.35	2,158	83.19	2,033	82.04	—	—	—	—	—	—	—	—	5,386	85.63	5,038	84.56
	Prep. and Grammar	120	88.24	127	86.40	252	92.99	190	88.79	643	86.89	272	81.20	482	85.01	232	82.27	1,497	87.34	821	83.95
	Private Secondary	40	95.24	121	90.98	64	90.14	345	90.55	82	85.42	190	82.97	50	83.33	103	78.63	236	87.74	759	86.84
6/12-6/24, R. or L. Eye	Public	373	10.09	386	11.09	345	13.3	362	14.61	—	—	—	—	—	—	—	—	718	11.41	748	12.56
	Prep. and Grammar	8	5.88	16	10.88	16	5.90	15	7.01	68	9.19	45	13.43	55	9.70	28	9.93	147	8.58	104	10.63
	Private Secondary	2	4.76	5	3.76	5	7.04	20	5.25	9	9.37	17	7.42	9	15.0	16	12.21	25	9.29	58	6.64
6/36 or worse, R. or L. Eye	Public	95	2.57	89	2.56	91	3.51	83	3.35	—	—	—	—	—	—	—	—	186	2.96	172	2.88
	Prep. and Grammar	8	5.88	4	2.72	3	1.11	9	4.20	29	3.92	18	5.37	30	5.29	22	7.80	70	4.08	53	5.42
	Private Secondary	—	—	7	5.26	2	2.82	16	4.20	5	5.21	22	9.61	1	1.67	12	9.16	8	2.97	57	6.52
Totals	Public	3,696	—	3,480	—	2,594	—	2,478	—	—	—	—	—	—	—	—	—	6,290	—	5,958	—
	Prep and Grammar	136	—	147	—	271	—	214	—	740	—	335	—	567	—	282	—	1,714	—	978	—
	Private Secondary	42	—	133	—	71	—	381	—	96	—	229	—	60	—	131	—	269	—	874	—

TABLE VI (2)

Rating		6/6-6/9				6/12-6/24				6/36 and Over				Totals	
School		Public %		Grammar %		Public %		Grammar %		Public %		Grammar %		Public	Grammar
1.		7,189	85.33	926	87.19	980	11.63	105	9.89	256	3.04	31	2.92	8,425	1,062
2.		2,250	84.05	942	81.98	363	13.56	131	11.41	64	2.39	76	6.61	2,677	1,149
3.		985	85.95	450	93.56	123	10.73	15	3.12	38	3.32	16	3.32	1,146	481
		10,424	85.11	2,318	86.11	1,466	11.97	251	9.32	358	2.92	123	4.57	12,248	2,692

Provision of Meals and Milk

The provision of meals in Local Authority and similar schools has continued on much the same lines as last year, though the actual number of meals served has decreased, due probably to the raising of the charge to children from 5d. to 6d. per meal and to a revision of the scale for necessitous pupils which reduced those so entitled by over three thousand per day.

During the year six additional meal centres were opened, three of these in existing schools and the others in those newly opened.

The supply of third of a pint bottles of milk has continued, upwards of nineteen and a half million bottles being handled. Considering this number, the complaints received by this Department on various grounds has been negligible.

Re-examination Group

During 1952, 17,385 pupils were re-examined for one or more defects previously found and listed for review. Amongst the “ preparatory and grammar ” pupils, 90% and amongst the “ public ” scholars, 76% of those treated were cured or improved. Contrasting the two “ same ” groups, those not improved, we find that the treated cases were 23%, and the untreated 44% in their respective groups. In 1952 the number of observation cases in the “ public ” and “ preparatory and grammar ” schools were 4,633 and 219 respectively compared with 3,281 and 136 in the previous year.

TABLE VII

Total No. Due: 21,199 (1,275)
Total No. Examined: 16,357 (1,028)

No. of Boys Seen: 8,048 (574)
No. of Girls Seen: 8,309 (454)

(Figures in Brackets above relate to Grammar Schools)

DEFECTS OF	TREATED						UNTREATED						Observation only
	Cured		Improved		Same		Total	Improved		Same		Total	
	No.	%	No.	%	No.	%		No.	%	No.	%		
Malnutrition	26	11·16	186	79·83	21	9·01	233	66·93	42	33·07	127	69	
	—	—	1	100·00	—	—	1	100·00	—	—	3	1	
Skin	20	26·67	37	49·33	18	24·0	75	50·0	6	50·0	12	32	
	10	58·82	6	35·29	1	5·89	17	85·72	1	14·28	7	16	
Eyes—Vision	6	·15	2,854	72·34	1,085	27·51	3,945	62·54	487	37·46	1,300	869	
	—	—	405	89·21	49	10·79	454	52·63	27	47·37	57	66	
„ Squint*	3	·2	856	56·09	667	43·71	1,526	36·36	63	63·64	99	62	
	—	—	37	67·27	18	32·73	55	100·00	—	—	1	—	
„ O.C.	42	35·3	66	55·46	11	9·24	119	47·37	20	52·63	38	25	
	2	25·0	6	75·0	—	—	8	—	2	100·00	2	2	

TABLE VII—continued

DEFECTS OF		TREATED										UNTREATED					Observation only
		Cured			Improved		Same		Total	Improved		Same		Total			
		No.	%	No.	%	No.	%	No.		%							
Ear	.....	57	23.46 7.14	155	63.79 92.86	31	12.75 —	243 14	82	44.32 100.00	103	55.68 —	185 2	114 4			
Nose and Throat	.....	629	62.71 27.27	338	33.7 70.45	36	3.59 2.28	1,003 44	1,245 45	47.54 81.82	1,374 10	52.46 18.18	2,619 55	1,914 52			
Speech	.....	3	2.06 —	124	84.93 71.43	19	13.01 28.57	146 7	62	48.44 50.0	66	51.56 50.0	128 4	167 3			
Heart	.....	2	1.82 —	78	70.91 100.00	30	27.27 —	110 3	130	77.84 100.00	37	22.16 —	167 2	234 16			
Lungs	.....	62	9.61 —	490	75.97 95.45	93	14.42 4.55	645 44	362	80.44 88.89	88	19.56 11.11	450 9	412 8			
T.B.	.....	2	7.14 —	25	89.29 —	1	3.57 —	28 —	5	100.00 —	—	— —	5 —	14 —			
Nervous	.....	3	6.52 —	41	89.13 100.00	2	4.35 —	46 2	10	83.33 —	2	16.67 —	12 —	18 —			
Orthopaedic	.....	22	7.43 7.90	240	81.08 89.47	34	11.49 2.63	296 38	82	55.78 92.86	65	44.22 7.14	147 42	137 27			
M. Retarded	.....	—	— —	10	38.46 —	16	61.54 —	26 —	17	31.48 100.00	37	68.52 —	54 1	117 —			
Other Conditions	.....	169	19.0 7.89	565	63.48 89.48	156	17.52 2.63	890 76	304	60.8 96.43	196	39.2 3.57	500 28	449 24			
TOTALS	.....	1,046 34	11.21 4.46	6,065 653	65.0 85.58	2,220 76	23.79 9.96	9,331 763	3,257 166	55.74 77.93	2,586 47	44.26 22.07	5,843 213	4,633 219			

*—Not included in "Vision"; P—Public School Figures and Percentages; G—Grammar School Figures and Percentages.

Nursery Schools, Centres and Special Schools

Nursery Schools and Centres:

There were nine such at the beginning of the year, five of these being closely connected with mill working. One of these was closed during the summer and others had their designation changed from nursery centres to nursery schools. The latter affected our work little because all children in attendance had their medical inspection on admission and thereafter each term plus any intercurrent examination needed.

Graymount Open Air School:

This school continues to fulfil a very important function in that it caters for 150 pupils who, because of some special physical defect, require admission to a school where the curriculum is geared down, so to speak, to the child's condition, where extra nourishment is available and a definite period of mid-day rest is part of the programme. It is a pity that the undoubted benefits derived by the children there are liable to be withheld from some of those selected because the cost of school meals is passed on to those parents who otherwise would be feeding them at home. Had a token charge been made the position would have been easier to meet.

During the year, there were 144 on rolls, their ages ranging from 6 to 15+. Of these 13 were physically handicapped but admitted for want of suitable places for them elsewhere.

Oakleigh and Mount Vernon (Special) Schools:

These schools are for the educationally retarded children. Oakleigh accommodates 185 and Mount Vernon, opened early in the Autumn, had places only for 140 as it was not quite completed. This additional school had been awaited for some time and a waiting list of suitable pupils had been built up to meet the expected new provision. Special provision had to be made to fill vacancies created in Oakleigh by the transfer of pupils attending there whose homes were closer to Mount Vernon.

The selection of suitable entrants to these schools depends on reports from teachers, parents and welfare officers. In every case, the decision to recommend transfer is preceded by a school report which is so designed as to indicate not only the scholastic attainments of the child and recent progress, but the reaction of such to school generally and to their fellows.

There are difficulties in gaining parental co-operation but, in the long run, most are satisfied that the best interests of the child are being served. In the remainder, it would appear that the parents are unable to weigh up the position and unappreciative of the special educational treatment provided in such schools.

Camp School:

As in former years, the camp school was held at Dundrum from the beginning of the summer term till the end of September. Prior to transfer, pupils were medically examined and suitable anticipatory measures taken to ensure that they left town in a satisfactory condition of cleanliness and free from infection. Emergency medical care was provided by a local practitioner who visited the camp periodically. In all, a total of 487 boys and 419 girls benefitted from their short stay at this camp.

The provision of a camp school of this nature fulfils a great need in that many city children, who would not otherwise be able to enjoy a stay by the sea, are provided with a holiday there, enjoying good food in very pleasant and health promoting surroundings. The absence of the children on holiday also provides a period of relaxation for the parent who remains at home in the knowledge that the children are in the good hands of the teachers who normally teach them during the year, and who now supervise their comfort and well-being.

School Health Activities other than those Carried out in Schools or Centres

Clinics:

The Clinic position at the end of the year was changed somewhat for the better in that there were definite prospects of an improvement within a foreseeable period of time. Cherryville Clinic, considerably enlarged and brought up-to-date, had been re-opened. Plans for the building of Cupar Street Clinic had been submitted and passed. Lincoln Avenue site had been taken to replace Carlisle

Clinic. Against this, the prospective re-conditioning of College Park East premises had been held up because they were being used temporarily as a district nurses' home until other premises for the nursing staff were reconstructed. Plans, however, for its re-conditioning had been prepared and once started should not take very long to complete. Meantime, the Carlisle and Academy Street premises have been hard put to meet our needs, and have been helped by the use of the Maternity and Child Health Clinic buildings at Mountcollyer and Ariel Street to provide dental treatment and physiotherapy sessions.

The Work of the School Health Visitor

It would be impossible to carry out the varied branches of school medicine were it not for the work carried out by the school nurse. Her activities co-ordinate and bind together the School Medical Service chiefly because she is the connecting link between the home and the clinic staff. In the course of such duties, 8,083 visits to homes were made last year, an increase of 1·3% over the previous year.

In the course of cleanliness surveys, health visitors inspected 266,725 pupils. Of these, 5·9% were found to have the eggs of vermin, and 1·86% were verminous. Both these figures are slightly over those for last year. Because of the very unsatisfactory home conditions found, four families had to be referred to the Environmental Health Division to be dealt with after investigation.

Medical Treatment and Special Activities

This work can be divided into several groups, viz., (1) Examination Clinics; (2) Eye, Ear Nose and Throat Clinics; (3) Orthopaedic Treatment; (4) Chest and Cardiac Cases; (5) Dental Treatment; (6) Tonsil and Adenoid Operations; (7) Ultra-Violet Light Therapy; (8) Minor Ailments; (9) Speech Therapy; (10) Child Guidance Cases; (11) Physiotherapy; (12) Head Cleansing.

With the exception of dental treatment, for which separate records are available elsewhere in this report, the Service dealt with 13,261 individual children during the year. This is 9·3% over that for 1951, and indicative of the extent of the service rendered when one relates it to the school population of 76,116.

Examination Clinics

Cases continue to be referred to our clinics from varying sources, the most important being by welfare officers, teachers, parents, and not the least, by magistrates; in the latter case, for referee purposes prior to being dealt with by the courts. Attendances totalled 27,790, an increase of 13·5% over the year 1951. Of those seen, 550 were referred on to private practitioners, and 92 to the Tuberculosis Authority.

The accompanying table indicates the different conditions for which medical examinations were carried out. Included therein are 35 cases to which home visits had to be paid for administrative purposes because the children could not be brought to the clinics.

TABLE VIII
Clinic Examinations

CONDITION	Percentage	CONDITION	Percentage
For Anaesthetics	45·02	For Infectious Disease Control	·96
„ Colds	1·36	„ Lungs	6·2
„ Debility	1·61	„ Mentally Dull	2·08
„ Ears	2·15	„ Nervous	1·22
„ Eyes—Vision only	5·07	„ Nose and Throat	4·84
„ Eyes—Other conditions	1·39	„ Skins	14·01
„ Gastro-Enteritis	1·46	„ Other classified small groups	9·19
„ Heart and Circulation	·51	Miscellaneous—unclassified	2·88

Eye, Ear, Nose and Throat Clinics

There is no diminution in the number of children who need attention in these clinics. Naturally, there are some with visual defects which require periodic re-examination by the specialists, and new cases are constantly being added. Consequently, numbers tend to increase rather than diminish, and an increase in the number of oculists is becoming necessary but almost impossible to provide, because of calls elsewhere in the province.

There are still some parents negligent of their children's sight. During the year one such was prosecuted successfully.

The number of cases seen totalled 5,159, an increase of 18·8% over the previous year, of which 246 were for external eye conditions. On the remainder, 931 had a second or confirmatory test for the provision of spectacles.

Ear, Nose, and Throat cases were referred to our one specialist who attended each of the three clinics in rotation every three weeks. In all, the patients' attendances came to 1,783, 8·3% increase. Of those seen, 69 needed no treatment for the condition for which they had been referred. Many were preparatory to tonsil and adenoid operation. All those operated upon were seen again in our clinics after treatment.

Orthopaedic Treatment

Major cases requiring treatment are sent to the local hospital for advice and treatment. In the past, most of our cases have been referred to the special clinic in the Belfast City Hospital.

Minor cases are dealt with by our physiotherapists and details are available in a later section.

Chest and Cardiac Cases

Special cases coming within these categories have been referred to the Clinics held in the Royal Belfast Hospital for Sick Children, to which two of our part-time officers are attached by arrangement with the Hospitals Authority. We receive, periodically, reports on the advice and treatment given such cases, and also on others of school age sent by private practitioners. We are thus in a position to oversee the progress or otherwise of all such pupils in the schools and, if necessary, to suggest special educational treatment for any child failing to make adequate or satisfactory progress, and coming within the category of "handicapped pupil."

Dental Treatment

Full details of the number inspected in school or clinic, together with the treatment offered, accepted and given will be found in the report of the Senior Dental Officer, which is appended and forms part of this report.

The dental treatment given has resulted in part from the increased dental inspections carried out in school. This, in turn, was due to increased staff, and due entirely to the better conditions prevailing in the Service. Even so, it will never be possible to overtake the damage already done to those children who were affected by the curtailment of output, resulting from the recent reduction of staff.

There is no doubt that the school dental officer occupies a special position in the dental treatment of children in that 79·3% of those parents advised to obtain treatment for their children elected to have it given in our clinics. This is the more significant in that most of these parents have themselves experienced school dental inspection and, in many cases, treatment in our clinics, and have personal experience of the valuable dental services provided for the school child.

Tonsil and Adenoid Operations

Because the beds in the Musgrave Park Hospital, previously allotted to us, were required for other purposes, we had to transfer our activities to the Belfast City Hospital where, after long delay, accommodation was eventually found. Most of the work carried out during the year was done in the

latter premises, but under different conditions, and the number of cases handled was limited. This meant that only 439 pupils were dealt with during the year. By July, we had again to surrender "our beds" for urgent cases of a purely medical nature; this prevented further operative work till the end of the year.

Ultra-Violet Light Therapy

Selected cases have been referred for treatment by our medical staff, and the attendances made have been very satisfactory, rising to 7,714 during the year. At times, numbers have been so great that, for convenience, we have had to duplicate clinics to cope with them.

Minor Ailment Treatment

Last year we reported an increase of attendances by 11·7%. This year the figure has gone up to 7,784, an increase of 25·9%. This is not only due to referral to the clinic of cases by the general practitioner, working within the General Health Service, but to a combination of factors, chiefly the vigilance of the school health visitors in picking out suitable cases, and to the requests of parents for such attention in our clinics.

Speech Therapy

For the first six months of the year there were two speech therapists on our staff. Thereafter only one remained to cope with the large number requiring treatment. There had to be a re-selection of the patients to be seen, and a drastic reduction of the centres to be attended. This naturally was very disappointing to our staff, and to the parents, but, in spite of this, the attendances totalled 3,936, made by 262 pupils.

The chief conditions treated were dyslalia and stammering. Those discharged from treatment came to 64, while 21 others were struck off for bad attendance.

It is essential that efforts be made to replace the lost member of our staff, and for the establishment to be increased still further to try and reduce the up and down nature of the service hitherto made available. This has been due entirely to paucity of supply, which it is hoped, will be less in the future, and could be overcome by the training of suitable local candidates.

Child Guidance

By the time additional clinic accommodation is available, with the opening of new clinics, steps should be taken to recruit a special child guidance team for the city school service, and independent of that available through the hospital authority, to which, of necessity, our cases are referred just now. In our opinion, the latter is quite unable to cope with all the material available for treatment from both city and counties. There are many cases seen by us which are not referred, simply because we know they are unlikely to receive attention soon, and only the most urgent can be sent with any prospect of treatment without too long a delay.

Physiotherapy

During the year, 793 children were given treatment through the centres in operation, and the attendances totalled 14,488. Although fewer pupils were treated, the attendances made were proportionately greater per case. There are, however, still too many children whose poor attendance at the physiotherapy clinics make it necessary for their names to be removed from the roll. Not only is a valuable opportunity for treatment wasted, but non-attendance of one child means that another child in need of treatment is unable to receive it.

Following three or more non-attendances and no reply to postal communication, it is often necessary for a health visitor to take a visit to the home of a child to ascertain the cause of non-attendance, and this again is wasteful of the valuable time of a trained worker.

In spite of these difficulties, a large number of children have received valuable treatment which has resulted in a definite improvement in their conditions and, in many cases, complete recovery. The conditions treated were mainly those of postural defect, flat foot, and respiratory conditions causing impairment of chest expansion. A large degree of the success of physiotherapy treatment given is dependent on the co-operation of the parents and teachers concerned.

At the end of the year, a total number of 262 pupils were on the waiting list for physiotherapy treatment.

Head Cleansing

Reference has been made already to the results of cleanliness surveys carried out by the school health visitors. Were it not for these regular and repeated inspections, the state of cleanliness of the school population would deteriorate quickly and seriously. For the troublesome case, and for those parents who lack proper facilities, provision has had to be made in our clinics, to which 8,134 visits were paid to have cleansing carried out by our staff. This has been necessary in spite of the very easily applied agents which can be purchased cheaply, and whose periodic use would greatly diminish the amount of cleansing work which must be carried out by this department.

Handicapped Pupils

Below is set forth in various tables the position, so far as we are able to determine it, as to the number of children in this area who should be classified as handicapped, and the special education treatment already being provided for some, and the requirements of the remainder.

In some cases, such as the severe epileptics, the condition of the sufferer is such that he or she is not acceptable by certain institutions because of low intellectual attainment.

In the case of those requiring "special care" the figures given refer to cases dealt with during the year under review, as, once they are passed to and accepted by the Hospital Authority, they cease to be our responsibility, and therefore cease to appear on our records.

TABLE IX
"Delicate" Pupils

AT	Hospital School		Open Air School		Day School		No School		Totals	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Rheumatism and Chorea	6	5	6	5	89	113	1	—	102	123
Hearts—Mild	—	—	—	—	41	57	—	—	41	57
T.B. Glands P.T.C.	5	8	9	2	99	88	2	8	115	106
Debility, Anaemia, Chests, etc.	3	5	85	73	152	123	3	—	243	201
TOTALS	14	18	100	80	381	381	6	8	501	487
	32		180		762		14		988	

TABLE X
Physically Handicapped Pupils

AT	Hospital School		Sana- torium School		Open Air School		Day School		No School		Home Tuition		Totals	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Boys	Boys	Girls	Boys	Girls	Boys	Girls
Hearts— Severe	2	2	—	—	6	7	74	92	—	3	6	5	88	109
Tuber- culosis: Pulmonary Bone and Gland	13	5	4	1	7	3	40	33	1	4	1	1	66	47
Orthopaedic	6	2	—	—	5	5	103	76	8	—	9	2	131	85
Other Conditions	6	—	—	—	2	7	16	11	5	2	6	3	35	23
TOTALS	27	9	4	1	20	22	233	212	14	9	22	11	320	264
	36		5		42		445		23		33		584	

TABLE XI
Handicapped Children

			Boys	Girls	Total
Blind (including partly sighted)	I. Suitable for training in school or class for totally blind	Attending certified Schools or classes for Blind	3	6	9
		At day school	—	—	—
		No school or institution	1	—	1
	II. Training in school for partially sighted	Attending certified schools or classes for partially sighted	9	5	14
		At day school	73	73	146
		At no school or institution	2	—	2
Deaf (including deaf and/or partially deaf)	I. Suitable for training in school for the totally deaf or deaf and dumb	Attending certified schools or classes for deaf	20	17	37
		At day school	—	—	—
		At unrecognised school	2	3	5
		At no school or institution	7	1	8
	II. Suitable for training in school or class for partially deaf and/or dumb	At certified schools or classes for the deaf	2	9	11
		At day school	2	2	4
		At unrecognised school	1	—	1
		No school	—	—	—
Educationally Sub-normal	I. Educable Group	Attending school for educationally sub-normal children	207	135	342
		Awaiting admission	40	16	56
		Potential cases—waiting for selection	256	150	406
	II. Requiring special care—reported during 1952	Referred	29	28	57
		Awaiting referral	—	—	—
Epileptics	I. Suffering from severe epilepsy	Attending certified special schools for epileptics	2	1	3
		In institutions other than certified schools	—	—	—
		At day school	2	2	4
		No school or institution	2	3	5
	II. Suffering from Epilepsy that is not severe	At day school	23	23	46
		No school	1	—	1

REPORT OF THE SENIOR DENTAL OFFICER FOR THE YEAR 1952.

Report covering the work of the Dental Section during the year 1952. A summarised statistical report in the form required by the Ministry of Health and Local Government is appended.

Dental Inspection in Schools

It is satisfactory to place on record that, as a result of the acquisition of additional staff, there was a considerable increase in the number of schools visited and thereby in the number of children dentally inspected. A total of 344 visits to schools provided for the examination of 39,087 children, equivalent in extent to 53·5% of the total on rolls, and resulting in an increase of 39·3% in the number inspected as compared with the foregoing year. There is each year an unavoidable percentage of absenteeism from inspection. This however is representative of the daily difference between the total on roll and the average attendance at school, rather than an indication of parental avoidance of the inspection. Actually no parent refused to have inspection for a child, and 87·8% of the children notified were on the average present on the day of inspection. The school inspections arranged during the year included all areas of the City, comprised all categories of schools and covered all age groups. The findings thereof can consequently be regarded as a fair indication of the dental health of the children throughout the City during the year.

Dental Condition of Children Inspected

Of the total number inspected in schools, 73·1% were found to have dental defects of one kind or another. In relation to those inspected, this represented a total of 28,573 children to be notified as in need of treatment. This defect percentage, in terms of the total children on rolls, including those in attendance at non-participating schools and colleges, would indicate that a total of 55,990 pupils in the City would, during the current year, require dental treatment. This represents at first sight an alarming total, which indeed it is. There may be some consolation however, in the fact that the over-all defect percentage of children in the City has now reached, at 73·1% the lowest point recorded during the past ten years. Nevertheless it will be realised that the year's classification of defects for the total children quoted, indicates a truly formidable amount of treatment necessary to produce an oral state of dental fitness. As an example, in regard to those actually inspected, and disregarding the possible total for those on rolls, some 60,000 filling treatments would be necessary during the year, more than half of this total requirement of fillings being for permanent teeth. Age groups covered by the classification of defects ranged from 3 years to 19 years. There is little variation between the sexes in defect. The years of school age showing the greatest degree of dental defect are those of 8, 9 and 10.

Post Inspection Notification and Parents' Response

By reason of limitations in respect of staff and clinics, it has not as yet been possible to notify to the full extent those found on inspection to require treatment. An increase in facilities during the year however permitted a greater effort in this direction, and 73·9% of the defectives or 21,129 were advised as regards the necessity for treatment. This total represents an increase in the issue of notifications of 42% over the previous year. To these notifications, which gave a free choice of dentist or clinic, etc., the response by parents is always substantial. A total of 84·1% during the year agreed to obtain treatment. Of this total 20·7% elected to consult a dentist privately, and the majority balance of 79·3% asked for appointments at our clinics. These response percentages clearly indicate the dental consciousness of the parents regarding their children; the high ratio of request, year by year in the region of 80%, for clinic treatment, particularly pointing to satisfaction in respect of the facilities for treatment provided by the Health Authority.

Attendances at City Clinics

Appointments were duly issued to all those eligible and who could be accommodated in clinic treatment. During the year, 18,579 individuals attended making a total of 58,178 patients at our several clinics. Of this latter figure, 7,941 were new patients, the high percentage balance being

those who returned regularly for treatment. There was an increase of 21·5% in the total number of patients for the year, and of 27·4% in the number of individuals concerned. It is gratifying that we have been able to increase our clinic activity during the year, but it must also be realised that even so, we can only provide as yet accommodation for approximately one third of the dental defectives on school rolls. Long waiting lists for treatment verify each year that our clinic accommodation is far from adequate as regards the total children who would wish to receive attention.

Dental Treatment in Clinics

Treatment sessions totalled 4,937, an increase of 1,638 over the previous year. Of the total sessions, 724 were required for extractions, 60 for special treatments, the balance of 4,153 being devoted to conservative treatments. As a result of the increased availability in sessions, a considerable advance was made in filling treatments, the total number of fillings at 22,712 being 36·7% higher than that for the previous year. Except in one aspect, there was an all round increase in the various branches of treatment, which collectively reached a total of 65,805, an increase of 24·9% over the previous year. This is the highest yearly total to be recorded by the service. Each child treated received an average of 4·1 treatments throughout the year. The Dental Officers in addition to their school inspection duties dealt with an average of 5,648 patients, and were each responsible for the comprehensive treatment of an average of 1,529 individuals. Except where contraindicated all children attending for extractions receive a simple general anaesthetic. Anaesthetists attend sessionally for this purpose. A total of 12,283 anaesthetics of this nature were administered during the year. In addition to the treatments, 25,630 clinical check inspections, an average of 1·9 per child inspected, were carried out at the various clinics.

General Remarks

As will be gathered from the foregoing details, a considerable advance has been made in the dental service during the year. This is primarily due to adoption of the Whitley Scale of salaries for Dental Officers and the consequent availability of additional staff not only in regard to full-time surgeons, but also by utilisation where there were clinic vacancies as a result of officers being engaged on school inspection duty, of the the sessional services of private practitioners. By this means, the fullest use of equipment and premises was made. Nevertheless the inadequacy of premises to house the demand on treatment is fully obvious. Our Cherryville Street clinic, recently enlarged, is working to full capacity, yet in common with our other clinics, has persistent waiting lists for treatment. At the expense of the Maternity and Child Health section, dental premises at Ariel Street and Mountcollyer Street have had to be continued in use full-time for treatments in respect of the school health division. These in addition to our clinic at Crumlin Road are also proving inadequate to meet the demand in the North and West areas of the City. It is therefore encouraging to know that proposals to erect substantially sized clinics for the North and West areas are afoot, and the urgency of provision in this direction cannot be over-stressed. It is to be regretted that active provision of the clinic at College Park East has not yet been made, as this clinic could materially relieve the pressure elsewhere. Most important event during the year was the opening of the Cherryville Street clinic in its extended and modernised form. This clinic has been the subject of much complimentary commendation, and is highly valued and appreciated by the parents and children in that area. The installation of pipeline apparatus for Nitrous Oxide and Oxygen Anaesthesia at our Cherryville Street and Academy Street clinics has proved both highly satisfactory and economical in practice, and the Authority is to be congratulated in providing these aids to operational comfort and professional efficiency.

In concluding this report, may I express thanks to all co-operating sections and personnel for their valued contributions towards the efforts of the year. Statistical tables in relation to all aspects of the School Dental Service are appended.

A. S. IRVING, L.D.S., R.C.S.(Edin.),

Senior Dental Officer.

Statistical Tables
School Dental Inspection

SCHOOL DENTAL INSPECTION	Area 1	Area 2	Area 3	Totals
SCHOOLS VISITED:				
Primary	32	20	31	83
Intermediate	1	3	1	5
Technical, Preparatory and Grammar	11	5	4	20
Nursery and Nursery Centre	2	4	2	8
Special	—	1	1	2
TOTAL Visits	142	91	111	344
" Inspection Sessions	132	94	112	338
" Inspected per Session (Average)	122	112	112	116
TOTAL SCHOOLS VISITED	46	33	39	118
" " " (per cent)	(61·3)	(48·5)	(73·6)	(60·2)
RESPONSE TO NOTIFICATION:				
Refusing Inspection	—	—	—	—
Absent from Inspection	2,130	1,485	1,834	5,449
" " " (per cent)	(11·7)	(12·4)	(12·8)	(12·2)
TOTAL CHILDREN NOTIFIED	18,186	12,002	14,348	44,536
" " " (per cent of Rolls)	(66·3)	(47·0)	(68·3)	(60·2)
CHILDREN INSPECTED:				
Primary	9,862	7,879	10,108	27,849
" (per cent of Group)	(47·7)	(37·0)	(56·5)	(46·6)
Intermediate	590	1,685	752	3,027
" (per cent of Group)	(75·4)	(66·3)	(74·5)	(69·9)
Technical, Preparatory and Grammar	5,186	1,096	1,424	7,706
" " (per cent of Group)	(89·2)	(91·9)	(77·9)	(89·0)
Nursery School and Centre	65	120	71	256
" " " (per cent of Group)	(95·6)	(86·9)	(92·2)	(90·4)
Special School	—	90	159	249
" " (per cent of Group)	—	(23·6)	(72·3)	(34·8)
TOTAL Boys Inspected	8,745	6,087	6,465	21,297
" Girls Inspected	7,311	4,430	6,049	17,790
TOTAL CHILDREN INSPECTED	16,056	10,517	12,514	39,087
" " " (per cent of Rolls)	(59·2)	(41·2)	(61·5)	(53·5)
CHILDREN DEFECTIVE:				
Primary	7,489	5,659	7,648	20,796
" (per cent Inspected)	(75·9)	(71·8)	(75·7)	(74·7)
Intermediate	443	1,237	525	2,205
" (per cent Inspected)	(75·1)	(73·4)	(69·8)	(72·8)
Technical, Preparatory and Grammar	3,446	777	1,031	5,254
" " (per cent Inspected)	(66·4)	(70·9)	(72·4)	(68·2)
Nursery School and Centre	37	71	33	141
" " " (per cent Inspected)	(56·9)	(59·2)	(46·5)	(55·1)
Special School	—	63	114	177
" " (per cent Inspected)	—	(70·0)	(71·2)	(71·1)
TOTAL Boys Defective	6,147	4,539	4,775	15,461
" " (per cent Inspected)	(72·9)	(70·8)	(73·9)	(72·6)
TOTAL Girls Defective	5,268	3,268	4,576	13,112
" " (per cent Inspected)	(72·1)	(73·8)	(75·6)	(73·7)
TOTAL CHILDREN DEFECTIVE	11,415	7,807	9,351	28,573
" " (per cent Inspected)	(72·5)	(72·1)	(74·7)	(73·1)

Classification of Dental Defects

CLASSIFICATION		Area 1	Area 2	Area 3	Totals
INDIVIDUALS:					
Children with	{ Saveable Teeth	5,169	6,016	4,513	15,698
	{ Unsaveable Teeth	2,013	2,561	1,023	5,607
	{ Saveable and Unsaveable Teeth	2,416	2,062	1,105	5,583
	{ Irregularity of Dentition	226	120	191	537
	{ Other Dental and Oral Defects	236	195	201	632
TEETH:					
Temporary Dentition	{ Sound	84,409	75,380	81,626	241,415
	{ Saveable	9,122	5,387	11,076	25,585
	{ Unsaveable	3,348	3,484	3,078	9,910
Permanent Dentition	{ Sound	238,086	164,455	171,963	574,504
	{ Saveable	13,381	10,459	10,438	34,278
	{ Unsaveable	1,842	1,469	1,188	4,499
TOTAL Teeth Saveable		22,503	15,846	21,514	59,863
" " Unsaveable		5,910	4,953	4,266	14,409
TOTAL Teeth Examined		350,188	260,634	279,369	890,191

Classification of Defectives

AGE GROUPS	BOYS			GIRLS		
	Inspected	Defective	Per cent Defective	Inspected	Defective	Per cent Defective
3	73	29	39·73	66	24	36·36
4	126	82	65·08	115	77	66·96
5	648	421	64·97	549	308	56·10
6	1,762	1,157	65·66	1,583	1,049	66·27
7	2,006	1,433	71·44	1,661	1,271	76·52
8	2,057	1,600	77·78	1,937	1,567	80·90
9	2,184	1,663	76·14	1,966	1,608	81·79
10	2,188	1,707	78·02	1,955	1,534	78·47
11	2,329	1,718	73·77	2,005	1,493	74·46
12	2,258	1,613	71·43	1,869	1,379	73·78
13	2,279	1,598	70·12	1,839	1,321	71·83
14	1,859	1,354	72·83	1,312	914	69·66
15	741	533	71·93	466	305	65·45
16	459	329	71·68	256	149	58·20
17	256	174	67·97	157	88	56·05
18	60	40	66·67	49	23	46·94
19	12	10	83·33	5	2	40·00
TOTALS	21,297	15,461	72·60	17,790	13,112	73·70

Post-Inspection Notification and Parents' Response

ITEMS	Area 1	Area 2	Area 3	Totals
NOTIFIED AS DEFECTIVE:				
Total Notified	7,801	6,835	6,493	21,129
" " (per cent)	(67.0)	(90.2)	(69.4)	(73.9)
PARENTS' RESPONSE:				
Refusing Treatment	704	604	462	1,770
" " (per cent)	(9.0)	(8.8)	(7.1)	(8.4)
No Response	448	807	327	1,582
" " (per cent)	(5.7)	(11.8)	(5.0)	(7.5)
Consenting to Treatment (Total)	6,649	5,424	5,704	17,777
" " " (per cent notified)	(85.3)	(79.4)	(87.9)	(84.1)
" " " By own Dentist	1,565	879	1,230	3,674
" " " (per cent)	(23.5)	(16.2)	(21.6)	(20.7)
" " " at City Clinics	5,084	4,545	4,474	14,103
" " " (per cent)	(76.5)	(83.8)	(78.4)	(79.3)
TREATMENT ARRANGED:				
Appointments—				
Issued	5,084	4,545	4,474	14,103
" Per cent Applications	(100.0)	(100.0)	(100.0)	(100.0)
" Per cent Defectives Notified	(65.2)	(66.5)	(68.9)	(66.7)
" Per cent Defectives on Rolls	(25.6)	(24.7)	(28.5)	(26.0)

Attendances at City Clinics

CLINIC ATTENDANCES	Area 1	Area 2	Area 3	Totals
INDIVIDUALS:				
Attending for Inspection	806	999	1,024	2,829
" " Treatment	1,842	1,755	1,512	5,109
" " Inspection and Treatment	3,449	4,509	2,683	10,641
TOTAL INDIVIDUALS	6,097	7,263	5,219	18,579
" " (per cent of Rolls)	(22.2)	(28.5)	(24.8)	(25.1)
PATIENTS:				
New Patients	2,656	2,816	2,469	7,941
" " (per cent)	(14.3)	(12.8)	(14.1)	(13.6)
Previous Patients	15,924	19,243	15,070	50,237
" " (per cent)	(85.7)	(87.2)	(85.9)	(86.4)
TOTAL PATIENTS	18,580	22,059	17,539	58,178

Dental Clinic Attendances:—Schools' Analysis

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
PRIMARY SCHOOLS:—Area 1				
All Saints' Junior	178	70	224	294
Argyle Senior	690	139	471	530
Ashmore Street Junior	265	98	249	421
Blythe Street Junior	285	79	193	306
Botanic Senior	477	184	613	612
Broadway Junior	341	103	250	294
Brown Street	435	147	367	461
Charter's Memorial	245	93	322	517
Donegall Road Junior	455	194	663	801
Earl Street Boys'	130	45	84	128
Earl Street Girls'	131	41	107	124
Earl Street Infants'	146	52	182	210
Fane Street	836	220	791	781
Linfield Junior	333	99	298	400
Mabel Street Junior	364	138	415	593
Magdalene Junior	178	77	271	308
Malone	486	163	524	616
Mariners'	228	56	143	192
Mayo Street Junior	390	140	550	683
McQuiston	310	121	341	408
Ormeau Road Junior	227	89	288	354
Percy Street Junior	152	76	320	380
Porter's Senior	308	78	233	255
Queen Victoria	460	173	590	749
St. Anthony's Boys'	224	65	180	249
St. Anthony's Girls'	218	42	109	151
St. Brendan's	320	126	283	460
St. Bride's	222	55	201	223
St. Catherine's	490	221	592	739
St. Colmcille's	65	26	59	84
St. Comgall's Boys'	514	167	370	603
St. Comgall's Girls'	508	84	210	298
St. Finian's	479	134	312	369
St. Gall's	510	98	315	360
St. John's Boys'	335	106	267	364
St. John's Girls'	348	123	271	364
St. Joseph's Boys'	358	85	200	248
St. Joseph's Girls'	318	70	160	200
St. Kevin's Boys'	750	67	182	168
St. Kevin's Girls'	727	69	222	186
St. Mary's Christian Brothers'	467	45	151	123
St. Mary's Boys'	102	18	62	48
St. Mary's Girls'	146	30	74	103
St. Mary's	368	68	227	189
St. Patrick's	163	23	42	49
St. Paul's Boys'	540	147	425	457
St. Paul's Girls'	172	18	53	73
St. Peter's Boys'	320	46	133	158
St. Peter's Girls'	352	80	203	192
St. Saviour's Junior	285	56	204	196
St. Saviour's Senior	305	26	101	86
St. Simon's	467	125	396	394
St. Vincent's	787	158	507	505
Sandy Row Junior	135	15	57	67
Springfield	475	194	671	736
Stranmillis	218	47	144	120
Taughmonagh	175	21	61	62
Ulsterville Junior	515	156	523	477
Workman Junior	236	47	149	162
No School	—	16	53	55
TOTALS	20,664	5,549	16,658	19,735

Dental Clinic Attendances:—Schools' Analysis—(continued)

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
PRIMARY SCHOOLS:—Area 2				
Alexandra	467	136	359	383
Antrim Road	280	151	551	578
Blenheim Junior	215	46	164	174
Carr's Glen	1,120	340	1,115	969
Convent	770	221	693	640
Crumlin Road Junior	344	51	180	162
Currie Junior	320	143	451	570
Duncairn Junior	210	120	404	473
Everton	870	372	1,078	1,288
Finiston	635	249	812	902
Forth River	565	250	893	934
Fortwilliam	193	41	143	143
Getty Junior	320	142	399	641
Grove Junior	770	435	1,403	1,546
Hemsworth Square Senior	615	211	581	736
Hillman Senior	380	172	567	597
Holy Cross Boys'	905	273	626	859
Holy Cross Girls'	780	197	489	616
Holy Family Boys'	340	122	376	440
Holy Family Girls'	280	103	356	390
Jaffe Memorial	325	124	342	378
John White Junior	518	189	456	598
Lancaster Street	227	80	169	235
Lynn Junior	270	119	314	384
Model Boys'	470	161	531	468
Model Girls'	495	163	596	581
Old Lodge Road	150	59	139	173
Perth Street Junior	330	116	382	446
Riddel Memorial Junior	336	114	339	527
St. Colmban's Boys'	465	112	277	337
St. Colmban's Girls'	423	103	229	277
St. Enoch's	380	134	334	338
St. Malachy's Boys'	115	20	59	63
St. Malachy's Girls'	222	37	114	97
St. Mark's	260	57	197	156
St. Mary's Junior	515	94	304	268
St. Mary's Star of Sea Boys'	325	14	34	41
St. Mary's Star of Sea Girls'	290	17	53	52
St. Patrick's Christian Brothers'	495	92	266	265
St. Patrick's Boys'	442	58	117	149
St. Patrick's Girls'	228	50	136	164
St. Paul's	140	40	128	124
St. Vincent de Paul's Boys'	138	15	54	44
St. Vincent de Paul's Girls'	122	12	45	38
Seaview	775	288	922	904
Skegoniel	552	203	723	720
Star of Sea Boys'	260	63	173	208
Star of Sea Girls'	245	63	160	182
Wheatfield	490	12	77	75
Whitehouse Junior	244	71	257	242
Wolfhill	210	11	47	37
Woodvale Junior	435	102	343	311
No School	—	18	53	65
TOTALS	21,271	6,586	20,010	21,988

Dental Clinic Attendances:—Schools' Analysis—(continued)

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
PRIMARY SCHOOLS:—Area 3				
Avoniel Junior	690	211	643	880
Beechfield Junior	635	232	587	889
Belmont Junior	402	123	479	530
Belvoir Hall Junior	330	66	191	268
Bloomfield	248	56	159	193
Christian Brothers'	270	39	137	163
Elmgrove	965	328	1,161	1,333
Euston Street Junior	275	140	486	541
Euston Street Senior	855	248	943	1,052
Harding Memorial	845	280	1,071	1,151
Lagan Village	81	35	96	136
Lomond Avenue	163	59	210	263
Megain Memorial Junior	472	143	323	504
Memel Street Junior	138	46	134	183
Mersey Street	940	267	672	943
Mountpottinger Infants'	222	13	54	64
Mountpottinger	420	140	508	539
Nazareth House	113	—	—	—
Nazareth Lodge	157	4	16	21
Nettlefield	778	285	945	1,127
Orangefield	640	244	888	961
Ormeau Park	464	172	679	784
Ravenhill Road Junior	300	126	322	366
Rosario Boys'	188	41	122	145
Rosario Girls'	206	52	193	207
Rosetta	653	165	577	538
Roslyn Street Junior	112	57	151	173
St. Anthony's Boys'	180	24	73	85
St. Anthony's Girls'	208	18	101	118
St. Colman's	313	84	172	263
St. Congall's Boys'	87	11	26	37
St. Congall's Girls'	125	11	32	39
St. Joseph's Boys'	142	14	56	60
St. Joseph's Girls'	120	15	55	76
St. Jude's	307	93	346	313
St. Malachy's Convent	494	62	205	221
St. Matthew's Boys'	470	32	103	109
St. Matthew's Girls'	510	44	117	115
Strand	719	200	797	918
Strandtown	1,345	482	1,727	1,927
Sydenham	440	82	233	234
Templemore Avenue	850	67	216	211
No School	—	12	41	42
TOTALS	17,872	4,823	16,047	18,722

Dental Clinic Attendances:—Schools' Analysis—continued

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
INTERMEDIATE SCHOOLS:				
Area 1				
Linfield	783	167	705	611
Area 2				
Edenderry	575	96	270	287
Glenwood	760	129	338	388
Graymount Girls'	420	132	403	441
Mountcollyer	785	114	320	291
TOTAL	2,540	471	1,331	1,407
Area 3				
Ashfield Girls'	210	12	45	41
Park Parade	800	131	469	464
TOTAL	1,010	143	514	505
TOTAL (All Areas)	4,333	781	2,550	2,523

Dental Clinic Attendances:—Schools' Analysis—*continued*

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
TECHNICAL, PREPARATORY and GRAMMAR:				
Area 1				
Ashleigh House	370	5	22	22
" " (Ardeen)	83	—	—	—
Christian Brothers' Grammar	644	78	202	232
Grosvenor High	702	82	297	258
Methodist College	1,450	51	241	249
Princess Gardens	288	42	148	153
Richmond Lodge	246	7	44	61
Royal Academical Institution	890	29	118	101
" " " (Inchmarlo)	244	5	23	19
Technical Intermediate	470	52	157	159
Victoria College	363	—	—	—
" " (Drumglass House)	53	—	—	—
" TOTAL"	5,803	351	1,252	1,254
Area 2				
Christian Brothers' Technical	290	6	8	2
Royal Academy	690	50	234	162
" " (Ben Madigan)	47	—	—	—
" " (Wingfield)	98	4	13	13
" " (Sinclair Memorial)	67	4	8	3
" TOTAL"	1,192	64	263	180
Area 3				
Annadale Boys'	583	64	233	180
Ashfield Girls'	344	36	137	132
Bloomfield Collegiate	360	41	229	230
Cabin Hill	265	2	11	20
Methodist College (Downey House)	276	29	104	101
TOTAL	1,828	172	714	663
TOTAL (All Areas)	8,823	587	2,229	2,097

Dental Clinic Attendances:—Schools' Analysis—*continued*

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
NURSERY SCHOOLS AND CENTRES:				
Area 1				
Arellian	30	3	11	8
Forth River	38	4	13	21
Area 2				
Edenderry	50	3	7	2
Frederick Street	24	1	3	3
Jennymount	27	3	9	16
Tudor Lodge	37	1	1	3
Area 3				
McArthur	47	—	—	—
Owen O'Cork	30	—	—	—
TOTAL (All Areas)	283	15	44	53

Dental Clinic Attendances:—Schools' Analysis—*continued*

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
SPECIAL SCHOOLS:				
Area 1				
Blind, Deaf and Dumb	114	1	2	1
Area 2				
Balmoral Training	100	75	181	227
Blind, Deaf and Dumb	—	—	—	—
Graymount	144	22	77	81
Mount Vernon	138	11	21	23
Area 3				
Blind, Deaf and Dumb	—	—	—	—
Oakleigh	190	47	123	163
Victoria Homes	30	24	65	42
TOTAL (All Areas)	716	180	469	537

Dental Clinic Attendances:—Schools' Analysis—*continued*

School	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
SCHOOLS OUTSIDE BOUNDARY:				
Area 1	—	23	66	52
Area 2	—	25	68	61
Area 3	—	10	37	37
TOTAL (All Areas)	—	58	171	150

Dental Clinic Attendances:—School Group Totals

School Group	Total on Rolls	Children Attending Clinic	Total Clinic Attendances	Total Treatments
Primary	59,807	16,958	52,715	60,445
Intermediate	4,333	781	2,550	2,523
Technical, Preparatory and Grammar	8,823	587	2,229	2,097
Nursery and Nursery Centre	283	15	44	53
Special	716	180	469	537
Schools Outside Boundary	—	58	171	150
TOTAL (All areas and Schools)	73,962	18,579	58,178	65,805

Dental Treatment in Clinics

TREATMENTS	Area 1	Area 2	Area 3	Totals
EXTRACTIONS:				
Temporary Dentition	6,712	7,846	7,369	21,927
Permanent Dentition	1,146	1,603	1,131	3,880
Total	7,858	9,449	8,500	25,807
„ (per cent of Treatments)	(36·0)	(39·7)	(42·1)	(39·2)
ANAESTHETICS:				
Local	46	321	86	453
General	3,788	4,957	3,538	12,283
Total	3,834	5,278	3,624	12,736
„ (per cent of Treatments)	(17·6)	(22·2)	(18·0)	(19·4)
FILLINGS:				
Temporary Dentition	260	653	405	1,318
Permanent Dentition	8,459	6,482	6,453	21,394
Total	8,719	7,135	6,858	22,712
„ (per cent of Treatments)	(40·0)	(29·9)	(34·0)	(34·5)
SPECIAL TREATMENTS:				
Orthodontic	6	6	4	16
X-Ray	113	45	54	212
Prosthetic	—	—	—	—
Total	119	51	58	228
„ (per cent of Treatments)	(0·5)	(0·2)	(0·3)	(0·3)
SUBSIDIARY TREATMENTS:				
Dressings (Tooth)	393	668	464	1,525
Scalings	105	38	30	173
Polishings	171	198	125	494
Other Operations	616	1,000	514	2,130
Total	1,285	1,904	1,133	4,322
„ (per cent of Treatments)	(5·9)	(8·0)	(5·6)	(6·6)
CLINICAL INSPECTIONS	7,633	10,428	7,569	25,630
TOTAL TREATMENTS	21,815	23,817	20,173	65,805

Analysis of Treatment Sessions

ITEMS	TOTALS
TREATMENT SESSIONS: (Half-day)	
Extractions } Anaesthetics }	724
Fillings } Subsidiary Treatments } Clinical Inspections }	4,153
Special Treatments	60
TOTAL TREATMENT SESSIONS	4,937

Dental Treatment Averages

ITEMS								AVERAGE
TREATMENT AVERAGE (Children):								
Extractions	.....	(Per Child Treated)	.....	.....	.....	.....	.....	1·6
Anaesthetics	....	( " " " )	.....	.....	.....	.....	.....	·8
Fillings	....	( " " " )	.....	.....	.....	.....	.....	1·4
Subsidiary Treatments	.....	( " " " )	.....	.....	.....	.....	.....	·3
Special Treatments	.....	( " " " )	.....	.....	.....	.....	.....	·01
TOTAL TREATMENTS (Per Child Treated)								4·11
CLINICAL INSPECTION:								
Check Inspections	.....	(Per Child Inspected)	.....	.....	.....	.....	.....	1·9
TREATMENT AVERAGE (Staff):								
Extractions	.....	(Per Extraction Session)	.....	.....	.....	.....	.....	35·6
"	.....	(Per Anaesthetic)	.....	.....	.....	.....	.....	2·0
Anaesthetics	.....	(Per Extraction Session)	.....	.....	.....	.....	.....	17·6
Fillings	.....	(Per Filling Session)	.....	.....	.....	.....	.....	5·5
Subsidiary Treatments	.....	( " " " )	.....	.....	.....	.....	.....	1·0
Special Treatments	.....	(Per Special Treatment Session)	.....	.....	.....	.....	.....	3·8
Clinical Inspections	.....	(Per Treatment Session)	.....	.....	.....	.....	.....	5·2
PATIENTS (Per Surgeon)								5,648·3
INDIVIDUALS TREATED (per Surgeon)								1,529·1

Staff Complement:—Clinic Accommodation

ITEMS								TOTALS
STAFF COMPLEMENT:								
Senior Dental Officer	.....		.....	.....	.....	.....	.....	1
Dental Officers	....	(Full-time)	.....	.....	.....	.....	.....	} Equivalent Total
" "	.....	(Sessional)	.....	.....	.....	.....	.....	
Anaesthetists	.....	(Sessional)	.....	.....	.....	.....	.....	10·3
Dental Clinic Nurses	.....	(Full-time)	.....	.....	.....	.....	.....	1·3
Dental Attendants	.....	(Full-time)	.....	.....	.....	.....	.....	2
"	.....	(Full-time)	.....	.....	.....	.....	.....	Administration (Equivalent Total)
"	.....	(Full-time)	.....	.....	.....	.....	.....	Inspection
"	.....	(Full-time)	.....	.....	.....	.....	.....	Reception
"	.....	(Full-time)	.....	.....	.....	.....	.....	Surgical (Equivalent Total)
TOTAL DENTAL STAFF (Full-time Equivalent)								33·35
CLINICS:								
Area 1.	(Dental Surgery accommodation for 4 Officers)	.....	.....	.....	.....	.....	.....	1
Area 2.	(Dental Surgery accommodation for 4 Officers)	.....	.....	.....	.....	.....	.....	3
Area 3.	(Dental Surgery accommodation for 4 Officers)	.....	.....	.....	.....	.....	.....	1
TOTAL DENTAL CLINICS								5

Comparative Dental Totals:—1950—1951—1952

ITEMS	1950	1951	1952	1952 compared 1951
SCHOOL DENTAL INSPECTION:				
				(Per cent)
Schools visited	49	72	118	(+) 39.0
Visits	159	216	344	(+) 37.2
Inspection Sessions	150	213	338	(+) 37.0
Notified for Inspection	17,319	26,795	44,536	(+) 39.8
Refusing Inspection	4	3	—	—
Absent from Inspection (per cent)	(11.9)	(11.4)	(12.2)	(+) 0.8
Inspected	15,281	23,726	39,087	(+) 39.3
Defective	10,476	18,683	28,573	(+) 34.6
Defective (per cent)	(68.6)	(78.7)	(73.1)	(—) 5.6
POST-INSPECTION NOTIFICATION:				
Notified as Defective	5,222	12,262	21,129	(+) 42.0
" " " (per cent)	(49.8)	(65.6)	(73.9)	(+) 8.3
RESPONSE TO NOTIFICATION:				
No Response (per cent)	(8.3)	(7.8)	(7.5)	(—) 0.3
Refusing Treatment (per cent)	(9.4)	(11.8)	(8.4)	(—) 3.4
Consenting to Treatment:—				
TOTAL (per cent)	(82.3)	(80.5)	(84.1)	(+) 3.6
By own Dentist (per cent)	(32.8)	(13.2)	(20.7)	(+) 7.5
At Clinics (per cent)	(67.2)	(86.8)	(79.3)	(—) 7.5
TREATMENT ARRANGED:				
Appointments—				
Issued (Total)	2,890	8,561	14,103	(+) 39.3
Per cent Clinic Applications	(100.0)	(100.0)	(100.0)	—
Per cent Defectives Notified	(55.3)	(69.8)	(66.7)	(—) 3.1
Per cent Defectives Inspected	(27.6)	(45.8)	(49.4)	(+) 3.6
ATTENDANCES AT CLINICS:				
New Patients (per cent)	(10.3)	(12.8)	(13.6)	(+) 0.8
Previous Patients (per cent)	(89.7)	(87.2)	(86.4)	(—) 0.8
Total Patients	48,680	45,643	58,178	(+) 21.5
Individuals	13,490	13,482	18,579	(+) 27.4
" (per cent of Roll Defectives)	(27.6)	(23.9)	(34.6)	(+) 10.7
TREATMENTS:				
Extractions—				
Temporary Dentition	15,370	17,675	21,927	(+) 19.4
Permanent Dentition	2,489	2,541	3,880	(+) 34.5
Total	17,859	20,216	25,807	(+) 21.7
Anaesthetics—				
Local	260	295	453	(+) 34.9
General	9,583	10,433	12,283	(+) 15.1
Total	9,843	10,728	12,736	(+) 15.8
Fillings				
Temporary Dentition	1,305	1,291	1,318	(+) 2.0
Permanent Dentition	14,825	13,081	21,394	(+) 38.8
Total	16,130	14,372	22,712	(+) 36.7
Special Treatments—				
Orthodontic	—	—	16	—
X-Ray	138	143	212	(+) 32.5
Prosthetic	—	—	—	—
Dressings (Tooth)	491	656	1,525	(+) 57.0
Scalings	104	112	173	(+) 35.3
Polishings	418	333	494	(+) 32.6
Other Operations	3,636	2,846	2,130	(—) 25.2
Clinical Inspections	24,599	22,407	25,630	(+) 12.6
TOTAL TREATMENTS	48,619	49,406	65,805	(+) 24.9
" Individuals Treated	7,015	7,922	15,750	(+) 49.7
" " (per cent Roll Defectives)	(14.4)	(14.0)	(29.3)	(+) 15.3

Supplementary Dental Report

Dental Inspection in Non-Participating Schools

SCHOOL OR COLLEGE	Notified	Absent	Refusing	Total Inspected	Total Defective	Per cent Defective
Belfast High School	432	13	—	410	322	78·54
„ „ „ (Somerton House)	205	15	—	190	101	53·16
Dominican College	395	63	—	332	256	77·11
St. Dominic's School	664	76	—	588	399	67·86
St. Malachy's College	700	87	—	613	558	91·03
Victoria College (Strathearn)	279	7	—	272	100	36·76
TOTALS	2,666	261	—	2,405	1,736	72·18

Summarised Dental Report*

Section (I)

1. Number of Children on School Rolls: (Participating)	73,962
2. Number of Children inspected by Dental Officers. (In Schools)	39,087
Specially Inspected (Check Inspections in Clinics)	25,630
TOTAL Inspected	64,717
3. Number found to require Treatment (73·1%)	28,573†
4. Number actually treated (Individuals)	15,750 } ‡
5. Attendance made by Children for Treatment	32,548 }
6. Half-days devoted to Inspection (In Schools)	338
„ „ „ Treatment	4,937
TOTAL	5,275
7. Fillings (Permanent Teeth)	21,394
„ (Temporary Teeth)	1,318
TOTAL	22,712
8. Extractions (Permanent Teeth)	3,880
„ (Temporary Teeth)	21,927
TOTAL	25,807
9. Administration of General Anaesthetics	12,283
10. Polishings	494
11. Scaling	173
12. Other Operations	2,130

Section (II)

As Text and Main Report Statistics.

Section (III)

Nil.

*—As prescribed by Ministry of Health and Local Government.

†—As a result of School Inspection.

‡—Total Clinic Attendances:—58,178. Total Treatments:—65,805.

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